

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known)

Chapter

11☐ Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Auto Supply Company, Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 56-1542433

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

3740 N. Patterson Avenue  
Winston Salem, NC 27105-3540

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Forsyth  
County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) www.ascodc.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: \_\_\_\_\_

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

**7. Describe debtor's business****A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

**B. Check all that apply**

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.**  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**4413****8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. **Check all that apply:**

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor

**Auto Supply Company, Inc.**

Name

Case number (if known)

**11. Why is the case filed in this district?***Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (*Check all that apply.*)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? \_\_\_\_\_

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other \_\_\_\_\_**Where is the property?** \_\_\_\_\_

Number, Street, City, State &amp; ZIP Code

**Is the property insured?**☐ No☐ Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

**Statistical and administrative information****13. Debtor's estimation of available funds***Check one:*

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**☐ 1-49☐ 50-99☐ 100-199☒ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☒ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☒ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor

**Auto Supply Company, Inc.**

Name

Case number (if known)

**Request for Relief, Declaration, and Signatures**

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 8, 2018**

MM / DD / YYYY

**X /s/ Charles A. Key, Jr.**

Signature of authorized representative of debtor

**Charles A. Key, Jr.**

Printed name

Title **President**

**18. Signature of attorney**

**X /s/ Ashley S. Rusher**

Signature of attorney for debtor

Date **January 8, 2018**

MM / DD / YYYY

**Ashley S. Rusher 14296**

Printed name

**Blanco Tackabery & Matamoros, P.A.**

Firm name

**P.O. Drawer 25008**

**Winston-Salem, NC 27114-5008**

Number, Street, City, State & ZIP Code

Contact phone

Email address

**14296**

Bar number and State

**Fill in this information to identify the case:**Debtor name Auto Supply Company, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule* \_\_\_\_\_
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 8, 2018**X /s/ Charles A. Key, Jr.**

Signature of individual signing on behalf of debtor

**Charles A. Key, Jr.**

Printed name

**President**

Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor name **Auto Supply Company, Inc.**  
 United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**  
 Case number (if known): \_\_\_\_\_

☐ Check if this is an  
 amended filing

**Official Form 204**
**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
A1-CARDONE P.O. BOX 827267 HTTPS://WWW.CARDONE.COM PHILADELPHIA, PA 19182		Trade debt				\$139,238.15
AC DELCO/GM 6200 GRAND POINT DR. MAIL CODE 485-303-713 GRAND BLANC, MI 48439		ALL PERSONAL PROPERTY		\$3,598,647.00	\$13,171,305.00	\$534,026.00
AMERICAN EXPRESS P O BOX 650448 DALLAS, TX 75265-0448		Credit Card				\$232,537.62
AUTOPART INTERNATIONAL P.O. BOX 419250 BOSTON, MA 02241-9250		Trade debt				\$100,706.14
AUTOPLUS AUTO PARTS 16741 COLLECTION CENTER D CHICAGO, IL 60693		Trade debt				\$498,120.44
BBB INDUSTRIES, LLC 8410 WOLF LAKE DR. #101 BARTLETT, TN 38133		Trade debt				\$424,727.77

Debtor **Auto Supply Company, Inc.**

Case number (if known)

Name

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
DENSO PRODUCTS & SERVICES P.O. BOX 601009 PASADENA, CA 91189-1009		Trade debt				\$141,947.53
FEDERAL-MOGUL CORPORATION P.O. BOX 636438 CINCINNATI, OH 45263-6438		Trade debt				\$146,416.91
FORD MOTOR COMPANY Ford Customer Service Division Credit Department P.O. Box 6220 Dearborn, MI 48121		INVENTORY MOTORCRAFT ACCOUNTS RECEIVABLE ONLY		\$3,040,981.00	\$1,035,569.00	\$3,040,981.00
GLOBAL PARTS DISTRIBUTION P O BOX 3045 MACON, GA 31205		Trade debt				\$235,304.16
GSP NORTH AMERICA P.O. BOX 161690 BOILING SPRINGS, SC 29316		Trade debt				\$82,799.96
KEY JR, CHARLES 197 HAYWOOD DRIVE ADVANCE, NC 27006						\$235,850.00
POWER STOP LLC 6112C W. 73RD STREET BEDFORD PARK, IL 60638		Trade debt				\$346,602.89
PREMIUM GUARD INC P.O. BOX 105328 ATLANTA, GA 30348-5328		Trade debt				\$119,759.77
PRIME AUTOMOTIVE WAREHOUSE P.O. BOX 741554 ATLANTA, GA 30374-1154		Trade debt				\$92,973.83
R & B, INC. P. O. BOX 8500 (S-4565) PHILADELPHIA, PA 19178-4565		Trade debt				\$124,810.08

Debtor **Auto Supply Company, Inc.**

Case number (if known)

Name

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
STANDARD MOTOR PRODUCTS 93307 NETWORK PLACE CHICAGO, IL 60673-1933		Trade debt				\$70,397.74
THE TIMKEN CORPORATION 28838 NETWORK PLACE CHICAGO, IL 60673-1288		Trade debt				\$160,743.45
UQUALITY AUTOMOTIVE PROD. DEPT LA 22888 PASADENA, CA 91185		Trade debt				\$118,303.13
VALVOLUME LLC P. O. BOX 117131 ATLANTA, GA 30368-7131		Trade debt				\$72,471.99



**Fill in this information to identify the case:**Debtor name **Auto Supply Company, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <b>0.00</b>
<b>1b. Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <b>13,171,305.00</b>
<b>1c. Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <b>13,171,305.00</b>

**Part 2: Summary of Liabilities**

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <b>16,769,784.00</b>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <b>215,424.92</b>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <b>5,055,630.19</b>
<b>4. Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <b>22,040,839.11</b>

**Fill in this information to identify the case:**Debtor name Auto Supply Company, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206A/B  
Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor**

Current value of debtor's interest		
<b>\$19,456.00</b>		

**2. Cash on hand****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. Wells Fargo Bank, NA P.O. Box 63020 San Francisco, CA 94163	Operating	8836	\$111,772.00
3.2. Wells Fargo Bank, NA P.O. Box 63020 San Francisco, CA 94163	Lockbox	9133	\$78,995.00
3.3. Wells Fargo Bank, NA P.O. Box 63020 San Francisco, CA 94163	Group Health	8828	\$0.00

**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$210,223.00****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.



Debtor Auto Supply Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

## 13. Does the debtor own any investments?

- ☐ No. Go to Part 5.
- ☒ Yes Fill in the information below.

		Valuation method used for current value	Current value of debtor's interest
14.	<b>Mutual funds or publicly traded stocks not included in Part 1</b> Name of fund or stock:		
14.1.	<u>N/A</u>		<u>\$0.00</u>

15.	<b>Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture</b> Name of entity:	% of ownership	
15.1.	<u>Automotive Distribution Network, LLC</u>	<u>2.80</u> %	<u>\$8,502.00</u>
15.2.	<u>Network Products, LLC</u>	<u>Unknown</u> %	<u>\$60,405.00</u>

16.	<b>Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1</b> Describe:		
16.1.	<u>N/A</u>		<u>\$0.00</u>

17.	<b>Total of Part 4.</b> Add lines 14 through 16. Copy the total to line 83.	<b>\$68,907.00</b>
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**Part 5: Inventory, excluding agriculture assets**

## 18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
- ☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	<b>Raw materials</b> <u>N/A</u>	<u>Done on cycle basis.</u>	<u>\$0.00</u>		<u>\$0.00</u>
20.	<b>Work in progress</b> <u>N/A</u>	<u>Done on cycle basis.</u>	<u>\$0.00</u>		<u>\$0.00</u>

21. **Finished goods, including goods held for resale**

Debtor Auto Supply Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

<b>Parts Inventory (Cycle count each part at least annually)</b>	<b>Done on cycle basis.</b>	<b>\$9,790,027.00</b>	<b>Cost</b>	<b>\$9,790,027.00</b>
<b>Warranty Warehouse (Cycle count each part at least annually)</b>	<b>Done on cycle basis.</b>	<b>\$97,462.00</b>	<b>Cost</b>	<b>\$97,462.00</b>
<b>Core Warehouse (Cycle count each part at least annually)</b>	<b>Done on cycle basis.</b>	<b>\$54,774.00</b>	<b>Cost</b>	<b>\$54,774.00</b>
22. <b>Other inventory or supplies</b>				
<b>None</b>		<b>\$0.00</b>		<b>\$0.00</b>

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

**\$9,942,263.00**24. **Is any of the property listed in Part 5 perishable?**

- ☒ No  
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**☐ No☒ Yes. Book value**236896**

Valuation method

**Cost**

Current Value

**236896**26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**☐ No☒ Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. <b>Office furniture</b>			
<b>Office Furniture</b>	<b>\$2,024.00</b>	<b>Appraisal</b>	<b>\$2,024.00</b>
<b>Leasehold Improvements</b>	<b>\$384,937.00</b>	<b>Appraisal</b>	<b>\$384,937.00</b>

40. **Office fixtures**

Debtor Auto Supply Company, Inc. Case number (If known) \_\_\_\_\_

Name

<b>Office Fixtures</b>	<b>\$31,860.00</b>	<b>Appraisal</b>	<b>\$31,860.00</b>
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41. <b>Office equipment, including all computer equipment and communication systems equipment and software</b> <b>Office Equipment (Computer Equipment)</b>	<b>\$211,730.00</b>	<b>Appraisal</b>	<b>\$211,730.00</b>
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42. <b>Collectibles</b> <i>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles</i>			
42.1. <b>Collectibles</b>	<b>\$0.00</b>		<b>\$0.00</b>

43. <b>Total of Part 7.</b> Add lines 39 through 42. Copy the total to line 86.	<b>\$630,551.00</b>
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44. **Is a depreciation schedule available for any of the property listed in Part 7?**☒ No☐ Yes45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**☐ No☒ Yes**Part 8: Machinery, equipment, and vehicles**46. **Does the debtor own or lease any machinery, equipment, or vehicles?**☐ No. Go to Part 9.☒ Yes Fill in the information below.**General description**

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

**Net book value of debtor's interest**  
(Where available)**Valuation method used for current value****Current value of debtor's interest**47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1. <b>Automobiles (See attached)</b>	<b>\$152,494.00</b>	<b>Appraisal</b>	<b>\$72,300.00</b>
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48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

48.1. <b>N/A</b>	<b>\$0.00</b>		<b>\$0.00</b>
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49. **Aircraft and accessories**

49.1. <b>N/A</b>	<b>\$0.00</b>		<b>\$0.00</b>
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49.2. <b>N/A</b>	<b>\$0.00</b>		<b>\$0.00</b>
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50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

N/A	<b>\$0.00</b>		<b>\$0.00</b>
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Debtor Auto Supply Company, Inc.  
Name

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51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$72,300.00**52. **Is a depreciation schedule available for any of the property listed in Part 8?**☐ No☒ Yes53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**☐ No☒ Yes**Part 9: Real property**54. **Does the debtor own or lease any real property?**☐ No. Go to Part 10.☒ Yes Fill in the information below.55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest****Description and location of property**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

**Nature and extent of debtor's interest in property****Net book value of debtor's interest**  
(Where available)**Valuation method used for current value****Current value of debtor's interest**55.1. **CORPORATE  
OFFICE/  
WAREHOUSE  
3740 N. PATTERSON  
AVENUE, WINSTON  
SALEM, NC**

Lease

\$0.00

\$0.00

55.2. **STORE #3  
1007 S. MARSHALL  
AVENUE  
WINSTON SALEM,  
NC**

Lease

\$0.00

\$0.00

55.3. **STORE #5  
1926 W. GREEN  
DRIVE  
HIGH POINT, NC**

Lease

\$0.00

\$0.00

55.4. **STORE #6  
403 E.  
BODENHAMER  
STREET  
KERNERSVILLE, NC**

Lease

\$0.00

\$0.00

55.5. **STORE #4  
2008 YONKERS  
ROAD  
RALEIGH, NC**

Lease

\$0.00

\$0.00

Debtor Auto Supply Company, Inc. Case number (If known) \_\_\_\_\_  
 Name

55.6. **STORE #9**  
**1112 1ST AVENUE**  
**SW**  
**HICKORY, NC** Lease \$0.00 \$0.00

55.7. **STORE #10**  
**2636 LEWISVILLE**  
**CLEMMONS ROAD**  
**CLEMMONS, NC** Lease \$0.00 \$0.00

55.8. **STORE #11**  
**1032 WINSTON**  
**STREET**  
**GREENSBORO, NC** Lease \$0.00 \$0.00

55.9. **STORE #2**  
**46 MICHAEL WYLIE**  
**DRIVE**  
**SUITE A-D**  
**CHARLOTTE, NC** Lease \$0.00 \$0.00

55.10 **CLOSED**  
**237 STARLITE ROAD**  
**MT. AIRY, NC** Lease \$0.00 \$0.00

55.11 **STORE #16**  
**813 MERITA STREET**  
**MT. AIRY, NC** Lease \$0.00 \$0.00

55.12 **STORE #17**  
**525 S. CHURCH**  
**STREET**  
**BURLINGTON, NC** Lease \$0.00 \$0.00

55.13 **LOOP RD. AUTO**  
**PARTS**  
**122 YEARGAN**  
**ROAD, GARNER, NC** Lease \$0.00 \$0.00

55.14 **STORE #22**  
**2351 CAROLINA**  
**BEACH ROAD**  
**WILMINGTON, NC** Lease \$0.00 \$0.00

55.15 **STORE #25**  
**6502 WINDMILL WAY**  
**WILMINGTON, NC** Lease \$0.00 \$0.00

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
 Copy the total to line 88.

\$0.00



Debtor Auto Supply Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No  
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets The Home of Great Service (Application No. 77561233, September 3, 2008) (Registration No. 3605636, April 14, 2009)	\$0.00		\$25,000.00
	One Call No Matter What Hood You're Under (Application No. 77561236) (Registration No. 3605636, April 14, 2009)	\$0.00		\$25,000.00
61.	Internet domain names and websites www.ascodc.com	\$0.00		\$0.00
62.	Licenses, franchises, and royalties N/A	\$0.00		\$0.00
63.	Customer lists, mailing lists, or other compilations Customer List	\$0.00		\$0.00
64.	Other intangibles, or intellectual property Non-Complete	\$57,345.00		\$0.00
65.	Goodwill N/A	\$0.00		\$0.00

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

**\$50,000.00**

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)

- ☐ No  
☒ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No

Debtor **Auto Supply Company, Inc.**  
Name

Case number (If known) \_\_\_\_\_

☒ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No

☐ Yes

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

Debtor Auto Supply Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$210,223.00</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$21,278.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$2,175,783.00</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$68,907.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$9,942,263.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$630,551.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$72,300.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$50,000.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$13,171,305.00</u>	+ 91b. <u>\$0.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$13,171,305.00</u>

## ATTACHMENT TO SCHEDULE A/B (PART 2) NO. 8.1

LINE OF BUSINESS	POLICY NUMBER	POLICY PERIOD	CARRIER	ANNUAL PREMIUM	MONTHLY INSTALLMENT	PAID THROUGH	COVERAGE SUMMARY
Property	CPP5018060	1/1/2018-12/31/2018	Republic Franklin Insurance Co.				\$4,300,000 Blanket Building; \$10,800,500 Business personal property
Commercial General Liability	CPP5018060	1/1/2018-12/31/2018	Utica Mutual Insurance Company	\$47,385	\$3,948.75	1/31/18	\$1,000,000 per occurrence; \$500,000 damage to rented premises; \$5,000 medical expenses; \$1,000,000 personal & adv. injury; \$3,000,000 general aggregate; \$3,000,000 products-comp/op agg
			Republic Franklin Insurance Co.				\$1,025,000 blanket building
Automobile Liability	5018057	1/1/2018-12/31/2018	Utica Mutual Insurance Company	\$155,522.00	\$12,960.17	1/31/18	\$1,000,000 combined single limit, \$50,000 hire phy. damage
Umbrella Liability	CULP5018058	1/1/2018-12/31/2018	Utica Mutual Insurance Company	\$17,078.00	\$1,423.17	1/31/18	\$10,000,000 each occurrence; \$10,000,000 aggregate
Workers Compensation	WC 5007274	1/1/2018-12/31/2018	Utica Mutual Insurance Company	\$265,235	\$22,102.92	1/31/18	Per Statute: \$500,000 each accident; \$500,000 disease each employee; \$500,000 disease policy limit
Umbrella Liability	MKL V2EUE100 112	1/1/2018-12/31/2018	Evanston Insurance	\$8,000.00	\$666.67	1/31/18	\$5,000,000 each occurrence
Employment Practices Liability/Fiduciary Liability	106658607	1/1/2018-12/31/2018	Travelers Casualty and Surety Company of America	\$8,971	\$747.58	1/31/18	\$500,000 of all claims

ATTACHMENT TO SCHEDULE A/B (PART 8) NO. 47  
AUTOMOBILE LIST

YEAR	MAKE & MODEL	VIN	VALUATION METHOD	DEBTOR'S INTEREST	CURRENT VALUE OF
2004	CHEVROLETASTRO CARGO VAN	1GCDM19X34B107095	OWNED	FMV	1,500.00
2010	TOYOTATACOMA	5TENX4CN4AZ722525	OWNED	FMV	5,250.00
2001	CHEVROLET1500 SILVERADO	1GCEC14W312145046	OWNED	FMV	2,000.00
2002	PONTIACMONTANA	1GMDX03082D29727	OWNED	FMV	1,000.00
1998	CHEVROLET1500 SILVERADO	1GCEC14W5WZ191372	OWNED	FMV	1,500.00
2008	FORDE150 VAN	1FTNE14W98DA72816	OWNED	FMV	3,000.00
2012	BUICKENCLAVE	5GAKRCED9CJ167016	OWNED	FMV	9,750.00
1998	INTERNATIONALMDL 4700	1HTSCAAM8XH680199	OWNED	FMV	7,500.00
2006	CHEVROLETCOLORADO	1GCCS148468153293	OWNED	FMV	1,800.00
2006	CHEVROLET7500	1GBK7C1326F419301	OWNED	FMV	32,500.00
2003	CHEVROLETASTRO CARGO VAN	1GC0M19X33B151466	OWNED	FMV	1,500.00
1998	CHEVROLET1500 SILVERADO	1GCG5149388178116	OWNED	FMV	750.00
2006	PONTIACVIBE	5X2SL658162442291	OWNED	FMV	2,500.00
2004	CHEVROLETASTRO CARGO VAN	1GCDM19X64B115725	OWNED	FMV	1,750.00
2016	FORD F-750	1FDWF7DC4GDA02323	CAPITAL LEASE		0.00
2016	FORD F-750	1FDWF7DC2GDA02322	CAPITAL LEASE		0.00
2012	KENWORTH TRUCK	2NKHMH6X8CM308367	CAPITAL LEASE		0.00
2017	FORD	1FDWF7DC3HDB02513	CAPITAL LEASE		0.00
2008	G1500 VAN	1GCRG15X781186191	OPERATING LEASE		0
2011	HHR	3GNBAAF78BS659275	OPERATING LEASE		0
2012	SONIC	1G1JA6SH4C4169614	OPERATING LEASE		0
12	SONIC	1G1JA6SH3C4167952	OPERATING LEASE		0
12	SONIC	1G1JA6SH7C4214870	OPERATING LEASE		0
13	SONIC	1G1JA6SH6D4217843	OPERATING LEASE		0
15	FORD FOCUS	1FADP3K21FL311172	OPERATING LEASE		0
16	FORD FOCUS	1FADP3K24GL241314	OPERATING LEASE		0
17	FORD FOCUS SE	1FADP3K20HL281892	OPERATING LEASE		0
08	CHEV COLORADO W/LIFT	1GCCS149688166753	OPERATING LEASE		0
08	CHEV COLORADO	1GCCS149788188017	OPERATING LEASE		0
11	CHEV COLORADO	1GCCSBF90B8132513	OPERATING LEASE		0

YEAR	MAKE & MODEL	VIN	VALUATION METHOD	DEBTOR'S INTEREST	CURRENT VALUE OF
12	SONIC	IG1JA6SH9C4223196	OPERATING LEASE	0	
13	SONIC	IG1JA6SH8D4203474	OPERATING LEASE	0	
16	FORD FOCUS	IFADP3K21GL241478	OPERATING LEASE	0	
11	AVEO	KL1TD6DEXBB252119	OPERATING LEASE	0	
12	SONIC	IG1JA6SH6C4169498	OPERATING LEASE	0	
17	FORD FOCUS SE	IFADP3K27HL294168	OPERATING LEASE	0	
08	CHEV COLORADO W/LIFT	IGCCS149088167168	OPERATING LEASE	0	
11	HHR	3GNBAAFV5BS640649	OPERATING LEASE	0	
12	SONIC	IG1JA6SH2C4170020	OPERATING LEASE	0	
12	SONIC	IG1JA6SH9C4215339	OPERATING LEASE	0	
12	SONIC	IG1JA6SH9C4213851	OPERATING LEASE	0	
14	FOCUS	IFADP3K26EL302160	OPERATING LEASE	0	
12	SONIC	IG1JA6SH1C4169361	OPERATING LEASE	0	
14	FOCUS	IFADP3K21EL323384	OPERATING LEASE	0	
14	FORD FOCUS	IFADP3K29EL436046	OPERATING LEASE	0	
16	FORD FOCUS	IFADP3K20GL201067	OPERATING LEASE	0	
16	FORD FOCUS	IFADP3K28GL385223	OPERATING LEASE	0	
17	FORD FOCUS SE	IFADP3K29HL281924	OPERATING LEASE	0	
08	CHEV COLORADO W/LIFT	IGCCS149688169569	OPERATING LEASE	0	
10	AVEO	KL1TD6DE0AB096171	OPERATING LEASE	0	
11	HHR	3GNBAAFV6BS642216	OPERATING LEASE	0	
14	FOCUS	IFADP3K23EL323385	OPERATING LEASE	0	
16	FORD FOCUS	IFADP3K20GL241133	OPERATING LEASE	0	
17	FORD FOCUS SE	IFADP3K27HL208244	OPERATING LEASE	0	
08	E150 CARGO VANS	IFTNE14W98DA72816	OPERATING LEASE	0	
11	AVEO	KL1TD6DEXBB252105	OPERATING LEASE	0	
13	SONIC	IG1JA6SH1D4204255	OPERATING LEASE	0	
11	CHEV COLORADO	IGCC5BF96B8112363	OPERATING LEASE	0	
11	AVEO	KL1TD6DE5BB246857	OPERATING LEASE	0	
13	SONIC	IG1JA6SHXD4204402	OPERATING LEASE	0	
12	SONIC	IG1JA6SH8C4137197	OPERATING LEASE	0	
13	FORD TRANSIT CONNECT	NMOLS7AN3DT159705	OPERATING LEASE	0	



YEAR	MAKE & MODEL	VIN	VALUATION METHOD	DEBTOR'S INTEREST	CURRENT VALUE OF
16	FORD FOCUS	1FADP3K21GL323680	OPERATING LEASE	0	
17	FORD FOCUS SE	1FADP3K23HL212629	OPERATING LEASE	0	
17	FORD FOCUS SE	1FADP3K28HL251314	OPERATING LEASE	0	
06	G SERIES VAN	1GCFG15X761163877	OPERATING LEASE	0	
08	G2500 CARGO VAN	1GCGG25C281104343	OPERATING LEASE	0	
11	AVEO	KL1TD6DE3BB251779	OPERATING LEASE	0	
11	CHEV COLORADO	1GCCSBF97B8135151	OPERATING LEASE	0	
12	SONIC	1G1JA6SH3C4116788	OPERATING LEASE	0	
14	FOCUS	1FADP3K23EL367306	OPERATING LEASE	0	
15	FORD FOCUS	1FADP3K28FL259247	OPERATING LEASE	0	
16	FORD FOCUS	1FADP3K20GL318146	OPERATING LEASE	0	
17	FORD FOCUS SE	1FADP3K23HL301679	OPERATING LEASE	0	
17	FORD FOCUS SE	1FADP3K2VHL269538	OPERATING LEASE	0	
13	SONIC	1G1JA6SH3D4204497	OPERATING LEASE	0	
13	SONIC	1G1JA6SH1D4205373	OPERATING LEASE	0	
17	FORD FOCUS SE	1FADP3K21HL251381	OPERATING LEASE	0	
17	FORD FOCUS SE	1FADP3K22HL274703	OPERATING LEASE	0	
8	G1500 CARGO VAN	1GCFG15X381143564	OPERATING LEASE	0	
11	AVEO	KL1TD6DE6BB251744	OPERATING LEASE	0	
11	AVEO	KL1TD6DE8BB247758	OPERATING LEASE	0	
12	SONIC	1G1JA6SH9C4170208	OPERATING LEASE	0	
13	SONIC	1G1JA6SH7D4205295	OPERATING LEASE	0	
13	SONIC	1G1JA6SH1D4211528	OPERATING LEASE	0	
14	FOCUS	1FADP3K2XEL323383	OPERATING LEASE	0	
15	TOYOTA TACOMA	5TFTX4CN5FX064087	OPERATING LEASE	0	
15	TOYOTA TACOMA	5TFTX4CNXFX063940	OPERATING LEASE	0	
16	NISSAN FRONTIER	1N6BD0CTXGN775905	OPERATING LEASE	0	
17	TOYOTA TACOMA SR	5TFRX5GN5HX087611	OPERATING LEASE	0	
08	CHEV COLORADO W/LIFT	1GCCS149088169101	OPERATING LEASE	0	
08	E150 CARGO VANS	1FTNE14W78DA76637	OPERATING LEASE	0	
13	SONIC	1G1JA6SH2D4204037	OPERATING LEASE	0	
14	FOCUS	1FADP3K27EL332803	OPERATING LEASE	0	

YEAR	MAKE & MODEL	VIN	VALUATION METHOD	DEBTOR'S INTEREST	CURRENT VALUE OF
11	AVEO	KL1TD6DE8BB252118	OPERATING LEASE	0	
11	HRH	3GNBAAF4BS641663	OPERATING LEASE	0	
14	FOCUS	1FADP3K21EL243891	OPERATING LEASE	0	
11	HRH	3GNBAAF4BS66417	OPERATING LEASE	0	
11	HRH	3GNBAAF4BS602069	OPERATING LEASE	0	
12	SONIC	1G1JA6SH9C4169849	OPERATING LEASE	0	
13	BLACK SONIC	1G1JA6SH7D4220816	OPERATING LEASE	0	
16	FORD FOCUS	1FADP3K21GL327874	OPERATING LEASE	0	
16	FORD FUSION	3FA6P0K95GR296845	OPERATING LEASE	0	
10	MOCHA MALIBU	1G1ZC5E00A4116015	OPERATING LEASE	0	
09	WHITE IMPALA	2G1WT57K091159746	OPERATING LEASE	0	
12	EXPRESS 2500 VAN	1GCWGFAXC1147689	OPERATING LEASE	0	
14	WHITE CHEV IMPALA	1G11Y5SLXEU134590	OPERATING LEASE	0	
15	FORD EXPLORER	1FM5K8F83FGA61169	OPERATING LEASE	0	
16	RED FORD FUSION	3FA6P0K99GR323206	OPERATING LEASE	0	
16	FORD EDGE	2FMPK3J98GBC49240	OPERATING LEASE	0	
06	G SERIES VAN	1GCFG15X161260539	OPERATING LEASE	0	
11	EXP 2500 W/BHEAD	1GCWGFAX7B1126698	OPERATING LEASE	0	
12	KENWORTH TRUCK	2NKHMM6X6CM308366	OPERATING LEASE	0	
09	GMC C7500	1GDK7C1B79F409494	OPERATING LEASE	0	
				<u>\$ 72,300</u>	



91C (09/13)

**UNITED STATES BANKRUPTCY COURT**  
**MIDDLE DISTRICT OF NORTH CAROLINA**

**In the Matter of:**  
**Auto Supply Company, Inc.**

**Case No.** \_\_\_\_\_

**DEBTOR'S CLAIM FOR PROPERTY EXEMPTIONS**

**Debtor.**

I, **Charles A. Key, Jr.**, the undersigned debtor, hereby claim the following property as exempt pursuant to 11 U.S.C. § 522(b)(3)(A), (B), and (C), the Laws of the State of North Carolina, and non-bankruptcy federal law.

☐ Check if the debtor claims as exempt any amount of interest that exceeds \$125,000 in value in property that the debtor or a dependent of the debtor uses as a residence.

1. **REAL OR PERSONAL PROPERTY USED BY DEBTOR OR DEBTOR'S DEPENDENT AS RESIDENCE OR BURIAL PLOT.** (NCGS 1C-1601(a)(1)).

Select appropriate exemption amount below:

- ☒ Total net value not to exceed \$35,000.  
☐ Total net value not to exceed \$60,000. (Debtor is unmarried, 65 years of age or older, property was previously owned by debtor as tenant by the entireties or joint tenant with rights of survivorship, and former co-owner is deceased.)

Description of Property & Address -NONE-	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
(a) Total Net Value			\$	<b>0.00</b>
Total Net Exemption			\$	<b>0.00</b>
(b) Unused portion of exemption, not to exceed \$5,000. (This amount, if any, may be carried forward and used to claim an exemption in any property owned by the debtor. (NCGS 1C-1601(a)(2)).			\$	<b>5,000.00</b>

2. **TENANCY BY THE ENTIRETY.** The following property is claimed as exempt pursuant to 11 U.S.C. § 522(b)(3)(B) and the laws of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of Property & Address -NONE-	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
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3. **MOTOR VEHICLE.** (NCGS 1C-1601(a)(3). Only one vehicle allowed under this paragraph with net value claimed as exempt not to exceed \$3,500.)

Year, Make, Model of Auto -NONE-	Market Value	Lien Holder(s)	Amt. Lien	Net Value
(a) Statutory allowance			\$	3,500
(b) Amount from 1 (b) above to be used in this paragraph. (A part or all of 1 (b) may be used as needed.)			\$	
Total Net Exemption			\$	<b>0.00</b>

4. **TOOLS OF TRADE, IMPLEMENTS, OR PROFESSIONAL BOOKS.** (NCGS 1C-1601(a)(5). Used by debtor or debtor's dependent. Total net value of all items claimed as exempt not to exceed \$2,000.)

Description -NONE-	Market Value	Lien Holder(s)	Amt. Lien	Net Value
-----------------------	--------------	----------------	-----------	-----------

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(a) Statutory allowance \$ 2,000  
 (b) Amount from 1 (b) above to be used in this paragraph.  
 (A part or all of 1 (b) may be used as needed.) \$  
 Total Net Exemption \$ 0.00

5. **PERSONAL PROPERTY USED FOR HOUSEHOLD OR PERSONAL PURPOSES NEEDED BY DEBTOR OR DEBTOR'S DEPENDENTS.** (NCGS 1C-1601(a)(4). Debtor's aggregate interest, not to exceed \$5,000 in value for the debtor plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents.)

Description	Market Value	Lien Holder(s)	Amt. Lien	Net Value
-NONE-				
Total Net Value				0.00
(a) Statutory allowance for debtor	\$ 5,000			
(b) Statutory allowance for debtor's dependents: 0 dependents at \$1,000 each (not to exceed \$4,000 total for dependents)	0.00			
(c) Amount from 1(b) above to be used in this paragraph. (A part or all of 1 (b) may be used as needed.)				
Total Net Exemption				0.00

6. **LIFE INSURANCE.** (As provided in Article X, Section 5 of North Carolina Constitution.)

Name of Insurance Company\Policy No.\Name of Insured\Policy Date\Name of Beneficiary  
 -NONE-

7. **PROFESSIONALLY PRESCRIBED HEALTH AIDS (FOR DEBTOR OR DEBTOR'S DEPENDENTS).** (NCGS 1C-1601(a)(7). No limit on value or number of items.)

Description:  
 -NONE-

8. **DEBTOR'S RIGHT TO RECEIVE FOLLOWING COMPENSATION:** (NCGS 1C-1601(a)(8). No limit on number or amount.)

A. \$ -NONE- Compensation for personal injury to debtor or to person whom debtor was dependent for support.  
 B. \$ -NONE- Compensation for death of person of whom debtor was dependent for support.  
 C. \$ -NONE- Compensation from private disability policies or annuities.

9. **INDIVIDUAL RETIREMENT PLANS AS DEFINED IN THE INTERNAL REVENUE CODE AND ANY PLAN TREATED IN THE SAME MANNER AS AN INDIVIDUAL RETIREMENT PLAN UNDER THE INTERNAL REVENUE CODE.** (NCGS 1C-1601(a)(9). No limit on number or amount.) **AND OTHER RETIREMENT FUNDS DEFINED IN 11 U.S.C. § 522(b)(3)(c).**

Detailed Description	Value
-NONE-	

10. **COLLEGE SAVINGS PLANS QUALIFIED UNDER SECTION 529 OF THE INTERNAL REVENUE CODE.** (NCGS 1C-1601(a)(10). Total net value not to exceed \$25,000 and may not include any funds placed in a college saving plan within the preceding 12 months not in the ordinary course of the debtor's financial affairs. This exemption applies only to the extent that the funds are for a child of the debtor and will actually be used for the child's college or university expenses.)

Detailed Description	Value
-NONE-	

91C (09/13)

11. **RETIREMENT BENEFITS UNDER A RETIREMENT PLAN OF OTHER STATE AND GOVERNMENTAL UNITS OF OTHER STATES, TO THE EXTENT THOSE BENEFITS ARE EXEMPT UNDER THE LAWS OF THAT STATE OR GOVERNMENTAL UNIT.** (NCGS 1C-1601(a)(11). No limit on amount.)

**Description:****-NONE-**

12. **ALIMONY, SUPPORT, SEPARATION MAINTENANCE AND CHILD SUPPORT.** (NCGS 1C-1601(a)(12). No limit on amount to the extent such payments are reasonably necessary for the support of Debtor or dependent of Debtor.)

**Description:****-NONE-**

13. **ANY OTHER REAL OR PERSONAL PROPERTY WHICH DEBTOR DESIRES TO CLAIM AS EXEMPT THAT HAS NOT PREVIOUSLY BEEN CLAIMED ABOVE.** (NCGS 1C-1601(a)(2). The amount claimed may not exceed the remaining amount available under paragraph 1(b) which has not been used for other exemptions.)

<b>Description</b>	<b>Market Value</b>	<b>Lien Holder(s)</b>	<b>Amt. Lien</b>	<b>Net Value</b>
<b>-NONE-</b>				
(a) Total Net Value of property claimed in paragraph 13.			\$	<b>0.00</b>
(b) Total amount available from paragraph 1(b).			\$	<b>5,000.00</b>
(c) Less amounts from paragraph 1(b) which were used in the following paragraphs:				
Paragraph 3(b)	\$			
Paragraph 4(b)	\$			
Paragraph 5(c)	\$			
Net Balance Available from paragraph 1(b)			\$	<b>5,000.00</b>
Total Net Exemption			\$	

14. **OTHER EXEMPTIONS CLAIMED UNDER THE LAWS OF THE STATE OF NORTH CAROLINA:**

**-NONE-**

TOTAL VALUE OF PROPERTY CLAIMED AS EXEMPT \$ **0.00**

15. **EXEMPTIONS CLAIMED UNDER NON-BANKRUPTCY FEDERAL LAW:**

**-NONE-**

TOTAL VALUE OF PROPERTY CLAIMED AS EXEMPT \$ **0.00**

#### 16. RECENT PURCHASES

The exemptions provided in NCGS 1C-1601(a)(2), (3), (4), and (5) are inapplicable with respect to tangible personal property purchased by the debtor less than 90 days preceding the initiation of judgment collection proceedings or the filing of a petition for bankruptcy, unless the purchase of the property is directly traceable to the liquidation or conversion of property that may be exempt and no additional property was transferred into or used to acquire the replacement property.

List tangible personal property purchased by the debtor less than 90 days preceding the filing of the bankruptcy petition:

<b>Description</b>	<b>Market Value</b>	<b>Lien Holder(s)</b>	<b>Amt. Lien</b>	<b>Net Value</b>
<b>-NONE-</b>				

DATE January 8, 2018/s/ Charles A. Key, Jr.**Charles A. Key, Jr.**

Debtor

**Fill in this information to identify the case:**Debtor name **Auto Supply Company, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
<b>2.1</b>	<b>AC DELCO/GM</b> Creditor's Name <b>6200 GRAND POINT DR.</b> <b>MAIL CODE 485-303-713</b> <b>GRAND BLANC, MI 48439</b> Creditor's mailing address  Creditor's email address, if known  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>ALL PERSONAL PROPERTY</b>  Describe the lien <b>UCC</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,598,647.00</b>	<b>\$13,171,305.00</b>
<b>2.2</b>	<b>DELL</b> Creditor's Name <b>DBC DELL BS CREDIT REV</b> <b>ACCTR</b> <b>1 DELL WAY</b> <b>ROUND ROCK, TX 78864</b> Creditor's mailing address  <b>www.dellcustomerca.re.co</b> <b>m</b> Creditor's email address, if known  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b>	Describe debtor's property that is subject to a lien <b>COMPUTER EQUIPMENT</b>  Describe the lien <b>UCC</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply	<b>\$23,472.00</b>	<b>Unknown</b>

Debtor **Auto Supply Company, Inc.**

Case number (if know)

Name

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed**2.3 FORD MOTOR COMPANY**

Creditor's Name

**Ford Customer Service  
Division  
Credit Department  
P.O. Box 6220  
Dearborn, MI 48121**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**INVENTORY MOTORCRAFT ACCOUNTS  
RECEIVABLE ONLY****\$3,040,981.00****\$1,035,569.00**

Describe the lien

**PURCHASE MONEY SECURITY**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.4 WELLS FARGO BANK, NA**

Creditor's Name

**110 EAST BROWARD  
BLVD  
SUITE 1100  
FORT LAUDERDALE, FL  
33301**

Creditor's mailing address

**SUSAN.CARR@WELLSFA  
RGO.COM**

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**ALL ASSETS OF DEBTOR****\$9,006,684.00****\$13,171,305.00**

Describe the lien

**UCC**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.5 WELLS FARGO BANK, NA**

Describe debtor's property that is subject to a lien

**\$1,100,000.00****\$13,171,305.00**

Debtor **Auto Supply Company, Inc.**

Case number (if know)

Name

Creditor's Name

**110 EAST BROWARD  
BLVD  
SUITE 1100  
FORT LAUDERDALE, FL  
33301**

Creditor's mailing address

**ALL ASSETS OF DEBTOR**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$16,769,784.  
00**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

**Ashley A. Edwards  
PARKER POE  
Three Wells Fargo Center  
401 South Tryon Street, Suite 3000  
Charlotte, NC 28202**

Line 2.4

**Duane M. Geck  
SEVERSON & WERSON  
One Embarcadero Center, Suite 2600  
San Francisco, CA 94111**

Line 2.3

**Jeremy M. Downs  
GOLDBERG KOHN LTD  
55 East Monroe Street  
Chicago, IL 60603-5792**

Line 2.4

**Lawrence A. Lichtman  
HONIGMAN MILLER SCHWARTZ AND COHN LLP  
2290 First National Building  
660 Woodward Avenue  
Detroit, MI 48226**

Line 2.1

**Fill in this information to identify the case:**Debtor name **Auto Supply Company, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>ABBOTT, MICHAEL D</b> <b>0060 FRANKLIN RD</b> <b>GERMANTON, NC 27019</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$211.20</b>	<b>\$211.20</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address <b>ABEE, RICKEY H</b> <b>206 TOWNSEND ST SE</b> <b>VALDESE, NC 28690</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$216.00</b>	<b>\$216.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**

Case number (if known)

	Name	As of the petition filing date, the claim is:		
2.3	Priority creditor's name and mailing address <b>ADAMS, DENNIS</b> <b>5790 LITTLE OAK COURT</b> <b>GRANITE FALLS, NC 28630</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,381.31</b>	<b>\$2,381.31</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.4	Priority creditor's name and mailing address <b>AIKEN, JOHN E</b> <b>4182 SPIREA DRIVE</b> <b>WILMINGTON, NC 28403</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$203.76</b>	<b>\$203.76</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.5	Priority creditor's name and mailing address <b>ALAMANCE COUNTY</b> <b>124 WEST ELM STREET</b> <b>GRAHAM, NC 27253-2802</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$42.69</b>	<b>\$42.69</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.6	Priority creditor's name and mailing address <b>ALDERMAN, PHILLIP K</b> <b>1124 VANNSTONE DR</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		



Debtor **Auto Supply Company, Inc.**

Case number (if known)

2.7	Priority creditor's name and mailing address <b>ALLRED JR, JERRY W</b> <b>162 BRAMTON CT</b> <b>WINSTON-SALEM, NC 27127</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$810.00</b>	<b>\$810.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.8	Priority creditor's name and mailing address <b>ALLRED, JERRY</b> <b>301 BUD SINK RD</b> <b>LEXINGTON, NC 27295</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$919.00</b>	<b>\$919.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.9	Priority creditor's name and mailing address <b>ANDREW, KENNETH</b> <b>240 WELLS AVENUE</b> <b>WASHINGTON, NC 27889</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,692.04</b>	<b>\$1,692.04</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.10	Priority creditor's name and mailing address <b>APPLE, ARTHUR J</b> <b>4100 GRANBURY DR</b> <b>GREENSBORO, NC 27405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$884.26</b>	<b>\$884.26</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.11	Priority creditor's name and mailing address <b>ARENDALL, GARY</b> <b>404 PARK BOULEVARD</b> <b>WINSTON-SALEM, NC 27127</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$68.00</b>	<b>\$68.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.12	Priority creditor's name and mailing address <b>BALLREE, EMMETT F</b> <b>789 EDEN DRIVE</b> <b>SOUTHPORT, NC 28461</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$874.20</b>	<b>\$874.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.13	Priority creditor's name and mailing address <b>BAREFOOT JR, HENRY S</b> <b>100 RAND ROAD</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,021.00</b>	<b>\$1,021.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.14	Priority creditor's name and mailing address <b>BARLOW, RICHARD R</b> <b>130 WOODTREE LANE</b> <b>WINSTON-SALEM, NC 27107</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$223.25</b>	<b>\$223.25</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.15	Priority creditor's name and mailing address <b>BARNETTE, MICHAEL R</b> <b>936 REEDY CREEK ROAD</b> <b>LEXINGTON, NC 27295</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$550.00</b>	<b>\$550.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.16	Priority creditor's name and mailing address <b>BAUCOM, JOSEPH J</b> <b>6531 GLENN TEAGUE ROAD</b> <b>CHARLOTTE, NC 28216</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$208.08</b>	<b>\$208.08</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.17	Priority creditor's name and mailing address <b>BEAL, FORREST S</b> <b>893 OLD US HWY 52 S</b> <b>MT AIRY, NC 27030</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$727.50</b>	<b>\$727.50</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.18	Priority creditor's name and mailing address <b>BELL, BENJAMIN</b> <b>905 WESTSIDE DR.</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,890.30</b>	<b>\$1,890.30</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>	Case number (if known)		
	Name			

  

2.19	Priority creditor's name and mailing address <b>BENSON, RONNIE D</b> <b>804 FOREST DRIVE</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$240.00</b>	<b>\$240.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.20	Priority creditor's name and mailing address <b>BINGHAM, STEPHANIE H</b> <b>931 FRED MILLER RD</b> <b>LEXINGTON, NC 27292</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,039.36</b>	<b>\$1,039.36</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.21	Priority creditor's name and mailing address <b>BLACKMON, DEANGELO D</b> <b>2654 DALLAS DR.</b> <b>WINSTON-SALEM, NC 27107</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,409.50</b>	<b>\$1,409.50</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.22	Priority creditor's name and mailing address <b>BLACKMON, DONALD C</b> <b>4430 PARMELE RD</b> <b>CASTLE HAYNE, NC 28409</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$199.20</b>	<b>\$199.20</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.23	Priority creditor's name and mailing address <b>BOLICK, DONALD C</b> <b>4370 LISA DRIVE</b> <b>WINSTON-SALEM, NC 27103</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$216.00</b>	<b>\$216.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.24	Priority creditor's name and mailing address <b>BOND, JIMMIE W</b> <b>4525 FOX ROAD</b> <b>RALEIGH, NC 27616</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$246.00</b>	<b>\$246.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.25	Priority creditor's name and mailing address <b>BOOZER, ZACHARY C</b> <b>1478 COUNTRY MEADOW LANE</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.26	Priority creditor's name and mailing address <b>BOSTIC, LARRY J</b> <b>1016 ZELL EATON ROAD</b> <b>PINNACLE, NC 27043</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$235.20</b>	<b>\$235.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.27	Priority creditor's name and mailing address <b>BOWMAN JR, PHILIP L</b> <b>6160 PINE HALL ROAD</b> <b>WALNUT COVE, NC 27052</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.00</b>	<b>\$210.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.28	Priority creditor's name and mailing address <b>BOYETTE, JOHN T</b> <b>3537 APACHE DRIVE</b> <b>RALEIGH, NC 27609</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$810.00</b>	<b>\$810.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.29	Priority creditor's name and mailing address <b>BRANCH JR, ROLAND D</b> <b>1908 SAFFRON PLACE</b> <b>WINSTON-SALEM, NC 27127</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$211.20</b>	<b>\$211.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.30	Priority creditor's name and mailing address <b>BREWER, WALTER E</b> <b>1510 ANDOVER AVENUE</b> <b>GREENSBORO, NC 27405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$218.16</b>	<b>\$218.16</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**

Case number (if known)

	Name	As of the petition filing date, the claim is:		
2.31	Priority creditor's name and mailing address <b>BROACH, REGINALD K</b> <b>2618 SUMAC LANE</b> <b>BURLINGTON, NC 27215</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$209.76</b>	<b>\$209.76</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.32	Priority creditor's name and mailing address <b>BROOME JR, ROBERT J</b> <b>7554 LONG VALLEY DR</b> <b>HARRISBURG, NC 28075</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$208.08</b>	<b>\$208.08</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.33	Priority creditor's name and mailing address <b>BROWN, JOE B</b> <b>1480 23RD ST SW</b> <b>HICKORY, NC 28602</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.00</b>	<b>\$210.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.34	Priority creditor's name and mailing address <b>BROWN, RICHARD L</b> <b>171 COUNTRY CIRCLE</b> <b>ADVANCE, NC 27006</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,921.46</b>	<b>\$3,921.46</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.35	Priority creditor's name and mailing address <b>BROWNING, HERMAN L</b> <b>806 CYPRESS ST</b> <b>GREENSBORO, NC 27405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$192.00</b>	<b>\$192.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.36	Priority creditor's name and mailing address <b>BRYANT, ALLEN R</b> <b>3815 TILLMAN ROAD</b> <b>CHARLOTTE, NC 28208</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.00</b>	<b>\$210.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.37	Priority creditor's name and mailing address <b>BURKETT, JAMES M</b> <b>6329 GRANBY ST</b> <b>WILMINGTON, NC 28409</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$192.00</b>	<b>\$192.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.38	Priority creditor's name and mailing address <b>BUTLER III, EUGENE</b> <b>3428 CROSSWINDS ROAD</b> <b>CHARLOTTE, NC 28227</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,309.00</b>	<b>\$1,309.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		



Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
<hr/>		
2.39	Priority creditor's name and mailing address <b>BUTLER, TINA L</b> <b>5738 WALKER CHAPEL RD</b> <b>MORGANTON, NC 28655</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$403.00</b> <b>\$403.00</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.40	Priority creditor's name and mailing address <b>BYERLY, JENNIFER B</b> <b>3966 HILLCREST CT</b> <b>SOPHIA, NC 27350</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$1,364.80</b> <b>\$1,364.80</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.41	Priority creditor's name and mailing address <b>CALDWELL, CHRIS J</b> <b>327 S CHERRY ST</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$210.00</b> <b>\$210.00</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.42	Priority creditor's name and mailing address <b>CALDWELL, RICHARD</b> <b>5556 VIEWCOURT PARK</b> <b>HICKORY, NC 28602</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$240.72</b> <b>\$240.72</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
2.43	Priority creditor's name and mailing address <b>CANUP, THOMAS D</b> <b>191 EAST THOMAS RD</b> <b>THOMASVILLE, NC 27360</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$216.00</b> <b>\$216.00</b>
2.44	Priority creditor's name and mailing address <b>CAPPS, WILLIAM</b> <b>308 WICKER STREET</b> <b>GIBSONVILLE, NC 27249</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$210.00</b> <b>\$210.00</b>
2.45	Priority creditor's name and mailing address <b>CARLYLE, RICKY O</b> <b>133G CHAUCER MANOR LANE</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$216.00</b> <b>\$216.00</b>
2.46	Priority creditor's name and mailing address <b>CARTLEDGE, RICHARD L</b> <b>2127 MCKNIGHT MILL RD</b> <b>GREENSBORO, NC 27405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$225.36</b> <b>\$225.36</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
<hr/>		
2.47	Priority creditor's name and mailing address <b>CATAWBA COUNTY TAX COLLEC</b> <b>P.O. BOX 368</b> <b>NEWTON, NC 28658-0368</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$148.21</b> <b>\$148.21</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.48	Priority creditor's name and mailing address <b>CATES, DONALD R</b> <b>120 PAGETOWN ROAD</b> <b>ELON, NC 27244</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$210.00</b> <b>\$210.00</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.49	Priority creditor's name and mailing address <b>CATES, MICHAEL A</b> <b>PO BOX 438</b> <b>TOBACCOVILLE, NC 27050</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$780.96</b> <b>\$780.96</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.50	Priority creditor's name and mailing address <b>CAUDILL, DANIEL</b> <b>2680 GRIFFITH ROAD</b> <b>WINSTON-SALEM, NC 27103</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$1,103.60</b> <b>\$1,103.60</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.51	Priority creditor's name and mailing address <b>CHAPPELL, CYNTHIA C</b> <b>6900 GUY-JOHNSON LANE</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$78.75</b>	<b>\$78.75</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.52	Priority creditor's name and mailing address <b>CHAPPELL, EDWARD G</b> <b>1503 MIRIAM AVENUE</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$4,081.61</b>	<b>\$4,081.61</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.53	Priority creditor's name and mailing address <b>CHEEK, DESMOND M</b> <b>5700 CLOVIS RIDGE RD</b> <b>WAKE FOREST, NC 27587</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$552.00</b>	<b>\$552.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.54	Priority creditor's name and mailing address <b>CHILDERS, JEROMY S</b> <b>212 CATES AVE</b> <b>BURLINGTON, NC 27215</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,718.21</b>	<b>\$1,718.21</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**

Case number (if known)

2.55	Priority creditor's name and mailing address <b>CHINNIS JR, ROBERT C</b> <b>100 NEUSE BEND RD</b> <b>SMITHFIELD, NC 27577</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$924.70</b>	<b>\$924.70</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.56	Priority creditor's name and mailing address <b>CITY OF BURLINGTON</b> <b>P O BOX 1358</b> <b>BURLINGTON, NC 27216-1358</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$43.97</b>	<b>\$43.97</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.57	Priority creditor's name and mailing address <b>CITY OF MOUNT AIRY</b> <b>P.O. BOX 1725</b> <b>MOUNT AIRY, NC</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$58.98</b>	<b>\$58.98</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.58	Priority creditor's name and mailing address <b>CLODFELTER, KELLY S</b> <b>101 OAK FOREST LANE</b> <b>TRINITY, NC 27370</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,573.85</b>	<b>\$1,573.85</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)		
	Name				

  

2.59	Priority creditor's name and mailing address <b>CLOUD, WALTER J</b> <b>120 MYRTLE DRIVE</b> <b>MT AIRY, NC 27030</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$187.20</b>	<b>\$187.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.60	Priority creditor's name and mailing address <b>COATES, RANDY L</b> <b>5711 ARROWOOD LANE</b> <b>RALEIGH, NC 27606</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,344.40</b>	<b>\$1,344.40</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.61	Priority creditor's name and mailing address <b>COOK, STACEY D</b> <b>1377 NC 86-S</b> <b>PO BOX 146</b> <b>PROSPECT HILL, NC 27314</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,043.50</b>	<b>\$1,043.50</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.62	Priority creditor's name and mailing address <b>COOKE, SHANNON H</b> <b>4309 FORESTWOOD DRIVE</b> <b>GREENSBORO, NC 27405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$347.60</b>	<b>\$347.60</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
<hr/>		
2.63	Priority creditor's name and mailing address <b>COOPER, DANNY C</b> <b>664 S. FAYETTEVILLE ST</b> <b>LIBERTY, NC 27298</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$235.20</b> <b>\$235.20</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.64	Priority creditor's name and mailing address <b>CORDER, RODERICK G</b> <b>3837 MAMIE MAY RD</b> <b>FRANKLINVILLE, NC 27248</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$832.75</b> <b>\$832.75</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.65	Priority creditor's name and mailing address <b>CORNELISON, HOYLE</b> <b>429 ALDRIDGE ROAD</b> <b>ARCHDALE, NC 27263</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$254.64</b> <b>\$254.64</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.66	Priority creditor's name and mailing address <b>COUCH, TERRY M</b> <b>182 MAJOR ROAD</b> <b>ADVANCE, NC 27006</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$222.00</b> <b>\$222.00</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
2.67	Priority creditor's name and mailing address <b>CREED, BEVERLY</b> <b>7816 CW MOBILE PARK DRIVE</b> <b>EAST BEND, NC 27018</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$1,022.40</b> <b>\$1,022.40</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.68	Priority creditor's name and mailing address <b>CREWS, MICHAEL T</b> <b>951 RIDINGS RD</b> <b>LEWISVILLE, NC 27023</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$1,063.30</b> <b>\$1,063.30</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.69	Priority creditor's name and mailing address <b>CROWLEY, TIMOTHY J</b> <b>111 SALEM PL CRT</b> <b>CLEMMONS, NC 27012</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$211.20</b> <b>\$211.20</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.70	Priority creditor's name and mailing address <b>DARNELL, DOUGLAS</b> <b>7831 BEATTIES FORD RD</b> <b>CHARLOTTE, NC 28216</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$228.48</b> <b>\$228.48</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes



Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.71	Priority creditor's name and mailing address <b>DAVIS, MARSHALL L</b> <b>8401 OLD STAGE ROAD</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,059.00</b>	<b>\$1,059.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.72	Priority creditor's name and mailing address <b>DAVIS, ROMERA S</b> <b>188 RIDGEWAY LANE</b> <b>CLAYTON, NC 27520</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.73	Priority creditor's name and mailing address <b>DELP, JESSICA R</b> <b>912 PILOT POWER DAM RD</b> <b>PILOT MTN., NC 27041</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$387.50</b>	<b>\$387.50</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.74	Priority creditor's name and mailing address <b>DENTON, FRANK</b> <b>213 VFW ROAD</b> <b>MORGANTON, NC 28655</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$251.04</b>	<b>\$251.04</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.75	Priority creditor's name and mailing address <b>DEVLIN, MARK S</b> <b>129 CARRIAGE HOUSE TRL</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$244.80</b>	<b>\$244.80</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.76	Priority creditor's name and mailing address <b>DIBLER, DENNIS S</b> <b>3306 WATSON CHURCH RD</b> <b>MONROE, NC 28110</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,399.10</b>	<b>\$1,399.10</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.77	Priority creditor's name and mailing address <b>DONAHUE, THOMAS D</b> <b>3413 BETHEL RD</b> <b>WILMINGTON, NC 28409</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.78	Priority creditor's name and mailing address <b>DUCKETT, STEPHEN B</b> <b>1711 LONG PAW LANE</b> <b>CHARLOTTE, NC 28214</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$222.00</b>	<b>\$222.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.79	Priority creditor's name and mailing address <b>DURHAM, DAVID M</b> <b>6029 WALKING STICK TRAIL</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.80	Priority creditor's name and mailing address <b>EATON, STEVE M</b> <b>138 EATON ROAD</b> <b>MT. AIRY, NC 27030</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,287.28</b>	<b>\$1,287.28</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.81	Priority creditor's name and mailing address <b>FERGUSON, BLAKE P</b> <b>117 STAFFORD ANNEX</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,010.50</b>	<b>\$1,010.50</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.82	Priority creditor's name and mailing address <b>FORREST JR, OLLIE</b> <b>100 EMORY DRIVE</b> <b>GREENSBORO, NC 27406</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,418.31</b>	<b>\$2,418.31</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>	Case number (if known)		
	Name			

  

2.83	Priority creditor's name and mailing address <b>FORSYTH COUNTY TAX</b> <b>201 NORTH CHESTNUT STREET</b> <b>WINSTON-SALEM, NC 27101</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u><b>\$7,428.60</b></u>	<u><b>\$7,428.60</b></u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.84	Priority creditor's name and mailing address <b>FORTUNE, JOSHUA D</b> <b>141 ROCKHAVEN DR</b> <b>KING, NC 27021</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u><b>\$802.00</b></u>	<u><b>\$802.00</b></u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.85	Priority creditor's name and mailing address <b>FOX, DAVID</b> <b>1930 20TH AVE DR NE</b> <b>APT 31</b> <b>HICKORY, NC 28601</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u><b>\$1,120.97</b></u>	<u><b>\$1,120.97</b></u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.86	Priority creditor's name and mailing address <b>FRANCIS, WILLIAM T</b> <b>2918 PARK AVE</b> <b>WILMINGTON, NC 28403</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u><b>\$209.76</b></u>	<u><b>\$209.76</b></u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.87	Priority creditor's name and mailing address <b>FRANKLIN, PHILLIP R</b> <b>4841 DORSET RD</b> <b>WINSTON-SALEM, NC 27127</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.88	Priority creditor's name and mailing address <b>FRIZSELL, CLARENCE Y</b> <b>1536 10TH ST PL NW</b> <b>HICKORY, NC 28601</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$216.00</b>	<b>\$216.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.89	Priority creditor's name and mailing address <b>FRYE, AVERY</b> <b>3460 DAY ROAD</b> <b>WALKERTOWN, NC 27051</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$222.00</b>	<b>\$222.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.90	Priority creditor's name and mailing address <b>FULP, BYRON D</b> <b>PO BOX 412</b> <b>WALKERTOWN, NC 27051</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$220.80</b>	<b>\$220.80</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name		Case number (if known)
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2.91	Priority creditor's name and mailing address <b>GAINEY, STEPHEN</b> <b>5795 GAYRAY ST</b> <b>CLEMMONS, NC 27012</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$222.00</b>	<b>\$222.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.92	Priority creditor's name and mailing address <b>GILBERT, ROBERT W</b> <b>186 LITTLE BIT LANE</b> <b>PILOT MT., NC 27041</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$310.00</b>	<b>\$310.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.93	Priority creditor's name and mailing address <b>GLENN, JEFFREY</b> <b>P.O.BOX 4661</b> <b>WINSTON-SALEM, NC 27115</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,031.50</b>	<b>\$1,031.50</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.94	Priority creditor's name and mailing address <b>GOLDMAN, JACK</b> <b>1608 - 3 WILLOUGHBY PARK</b> <b>COURT</b> <b>WILMINGTON, NC 28412</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$197.76</b>	<b>\$197.76</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.95	Priority creditor's name and mailing address <b>GRAY, MILLARD W</b> <b>137 BRADFORD CIRCLE</b> <b>CLAYTON, NC 27527</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$937.00</b>	<b>\$937.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.96	Priority creditor's name and mailing address <b>GRIGGS, WILLIAM</b> <b>3224 MAIN STREET</b> <b>WINSTON-SALEM, NC 27127</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$798.58</b>	<b>\$798.58</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.97	Priority creditor's name and mailing address <b>GRIMES, TAMMY</b> <b>3909 NORTH MAIN STREET</b> <b>HIGH POINT, NC 27265</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,066.70</b>	<b>\$2,066.70</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.98	Priority creditor's name and mailing address <b>GUILFORD COUNTY TAX DEPT.</b> <b>PO BOX 71072</b> <b>CHARLOTTE, NC 28272-1072</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$328.43</b>	<b>\$328.43</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.99	Priority creditor's name and mailing address <b>GUTHRIE, DOUGLAS</b> <b>12117 FROGS LEAP CT</b> <b>CHARLOTTE, NC 28277</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$208.08</b>	<b>\$208.08</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.100	Priority creditor's name and mailing address <b>HAILE, SANDRA</b> <b>P.O. BOX 101</b> <b>GERMANTON, NC 27019</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,813.60</b>	<b>\$1,813.60</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.101	Priority creditor's name and mailing address <b>HALEY, RICHARD S</b> <b>114 MAVERICK TRAIL</b> <b>KING, NC 27021</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$797.37</b>	<b>\$797.37</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.102	Priority creditor's name and mailing address <b>HALL, KENNETH J</b> <b>102 DANIEL RD</b> <b>ROCKY POINT, NC 28457</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$199.20</b>	<b>\$199.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		



Debtor	<b>Auto Supply Company, Inc.</b>	Case number (if known)		
	Name			

  

2.103	Priority creditor's name and mailing address <b>HAMMER, THOMAS C</b> <b>2511 1/2 CAMPBELL ST</b> <b>GREENSBORO, NC 27405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$192.00</b>	<b>\$192.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.104	Priority creditor's name and mailing address <b>HAMMOCK, DENNIS</b> <b>5038 FRIENDSHIP CIRCLE RD</b> <b>EAST BEND, NC 27018</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,227.24</b>	<b>\$1,227.24</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.105	Priority creditor's name and mailing address <b>HANSEN, BRAD C</b> <b>310 EAST D STREET</b> <b>ERWIN, NC 28339</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,200.22</b>	<b>\$1,200.22</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.106	Priority creditor's name and mailing address <b>HARDEN, D JAMES</b> <b>1863 TURNER RD Lot 41</b> <b>MEBANE, NC 27302</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$154.00</b>	<b>\$154.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
2.107	Priority creditor's name and mailing address <b>HARRIS, DENISE L</b> <b>107 JOSIE LANE</b> <b>KING, NC 27021</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$2,026.75      \$2,026.75</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.108	Priority creditor's name and mailing address <b>HART, AMANDA E</b> <b>PO BOX 1192</b> <b>LELAND, NC 28451</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$199.20      \$199.20</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.109	Priority creditor's name and mailing address <b>HAWES, ALBERT</b> <b>4375-101 BIRCHWOOD DR</b> <b>WILMINGTON, NC 28405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$204.00      \$204.00</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.110	Priority creditor's name and mailing address <b>HAYES, TAYLOR I</b> <b>4016 EASTSIDE CT</b> <b>WINSTON-SALEM, NC 27127</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$727.24      \$727.24</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.111	Priority creditor's name and mailing address <b>HEATH, CHARLES L</b> <b>1112 FAIRWAY VILLAS DR</b> <b>WAKE FOREST, NC 27587</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.112	Priority creditor's name and mailing address <b>HEATH, SPENCER</b> <b>362 LYNNHAVEN PARK DR</b> <b>WINSTON-SALEM, NC 27107</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$252.00</b>	<b>\$252.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.113	Priority creditor's name and mailing address <b>HEDRICK, EDWARD D</b> <b>102 HINKLE ST</b> <b>THOMASVILLE, NC 27360</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,085.93</b>	<b>\$1,085.93</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.114	Priority creditor's name and mailing address <b>HELTON, RICHARD</b> <b>2487 TWINBROOK ROAD</b> <b>HICKORY, NC 28602</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$238.32</b>	<b>\$238.32</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**

Case number (if known)

2.115	Priority creditor's name and mailing address <b>HINSON, GRACE</b> <b>4813 SINCLAIR DR</b> <b>RALEIGH, NC 27616</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,079.18</b>	<b>\$1,079.18</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.116	Priority creditor's name and mailing address <b>HOLLOWAY, ANTHONY J</b> <b>8622 BUTTERFIELD CT</b> <b>HARRISBURG, NC 28075</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,005.50</b>	<b>\$2,005.50</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.117	Priority creditor's name and mailing address <b>HOOD, MARK P</b> <b>2533 SANDERS ROAD</b> <b>WILLOW SPRING, NC 27592</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,788.15</b>	<b>\$1,788.15</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.118	Priority creditor's name and mailing address <b>HOOTON, KEVIN</b> <b>6312 STEARMAN COURT</b> <b>WILMINGTON, NC 28409</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,004.00</b>	<b>\$1,004.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.119	Priority creditor's name and mailing address <b>HOWELL, RANDALL G</b> <b>1296 MEADOWLARK RD</b> <b>WALNUT COVE, NC 27052</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$211.20</b>	<b>\$211.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.120	Priority creditor's name and mailing address <b>HUMPHRIES, JAMES K</b> <b>6241 BLUE BONNET LANE</b> <b>WINSTON-SALEM, NC 27103</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$217.20</b>	<b>\$217.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.121	Priority creditor's name and mailing address <b>HURT, DANIEL W</b> <b>2125 DARTMOUTH GLEN DR</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$244.80</b>	<b>\$244.80</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.122	Priority creditor's name and mailing address <b>HUTCHENS, HARRISON W</b> <b>4510 RIVER RIDGE ROAD</b> <b>PFAFFTOWN, NC 27040</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.00</b>	<b>\$210.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.123	Priority creditor's name and mailing address <b>HUTCHENS, JONATHAN B</b> <b>305 D SAVANNAH PLACE</b> <b>KING, NC 27021</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$884.60</b>	<b>\$884.60</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.124	Priority creditor's name and mailing address <b>INMAN, MICHAEL T</b> <b>110 SAPPHIRE LANE</b> <b>PILOT MTN, NC 27041</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,146.84</b>	<b>\$1,146.84</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.125	Priority creditor's name and mailing address <b>INTERNAL REVENUE SERVICE</b> <b>PO BOX 7346</b> <b>PHILADELPHIA, PA 19101</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>NOTICE ONLY</b>		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.126	Priority creditor's name and mailing address <b>ISAAC, CHARLES E</b> <b>122 JONES CHAPEL RD</b> <b>MT AIRY, NC 27030</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$174.00</b>	<b>\$174.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.127	Priority creditor's name and mailing address <b>ISLEY, THOMAS</b> <b>1174 RUFF LEONARD RD</b> <b>LEXINGTON, NC 27295</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$222.00</b>	<b>\$222.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.128	Priority creditor's name and mailing address <b>JAMES, WILLIAM</b> <b>1021 BEESONS FIELD DR</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$370.00</b>	<b>\$370.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.129	Priority creditor's name and mailing address <b>JOHNSON, CLAUDE R</b> <b>3509 NORMANDY RD</b> <b>GREENSBORO, NC 27408</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.96</b>	<b>\$210.96</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.130	Priority creditor's name and mailing address <b>JOHNSON, LINVILLE C</b> <b>136 HASTY HILL RD</b> <b>THOMASVILLE, NC 27360</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$243.84</b>	<b>\$243.84</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
2.131	Priority creditor's name and mailing address <b>JOHNSON, MICHAEL C</b> <b>1311 VALLEY ROAD</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$1,221.03      \$1,221.03</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.132	Priority creditor's name and mailing address <b>JONES, LARRY D</b> <b>5121 SYLVAN TRAIL</b> <b>TRINITY, NC 27370</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$236.64      \$236.64</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.133	Priority creditor's name and mailing address <b>JORDAN, BRUCE A</b> <b>1660 MACHINE SHOP RD</b> <b>HICKORY, NC 28602</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$215.52      \$215.52</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.134	Priority creditor's name and mailing address <b>JOYCE, RANDY</b> <b>161 GUINNESS LANE</b> <b>MT. AIRY, NC 27030</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$2,641.95      \$2,641.95</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes



Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.135	Priority creditor's name and mailing address <b>KAPP, KARL</b> <b>286 ST. JAMES DR</b> <b>WINSTON-SALEM, NC 27107</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$5,880.48</b>	<b>\$5,880.48</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.136	Priority creditor's name and mailing address <b>KASSA, DAWN T</b> <b>601 NOVEMBER ST</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$222.00</b>	<b>\$222.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.137	Priority creditor's name and mailing address <b>KEITHLEY, DENNIS E</b> <b>625 PARKLAND CT</b> <b>WINSTON-SALEM, NC 27127</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.24</b>	<b>\$210.24</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.138	Priority creditor's name and mailing address <b>KELLY JR, HAYWOOD N</b> <b>24 PINECREST PKWY</b> <b>WILMINGTON, NC 28401</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$197.76</b>	<b>\$197.76</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.139	Priority creditor's name and mailing address <b>KENNEY, DANIEL W</b> <b>1519 VILLAGE DR. APT 1</b> <b>WILMINGTON, NC 28401</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$211.92</b>	<b>\$211.92</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.140	Priority creditor's name and mailing address <b>KEY JR, CHARLES</b> <b>197 HAYWOOD DRIVE</b> <b>ADVANCE, NC 27006</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$5,873.66</b>	<b>\$5,873.66</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.141	Priority creditor's name and mailing address <b>KEY, C. ANDREW</b> <b>322 HANOVER ARMS CT</b> <b>WINSTON-SALEM, NC 27104</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,288.94</b>	<b>\$1,288.94</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.142	Priority creditor's name and mailing address <b>KING, WADE</b> <b>563 ALSPAUGH DR</b> <b>WINSTON-SALEM, NC 27105</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$234.00</b>	<b>\$234.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>	Case number (if known)		
	Name			

  

2.143	Priority creditor's name and mailing address <b>KRESS, MICHAEL</b> <b>1411 N SHORE DRIVE</b> <b>SOUTHPORT, NC 28461</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,780.46</b>	<b>\$2,780.46</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.144	Priority creditor's name and mailing address <b>LANIER, BARRY L</b> <b>2945 KECOUGHTAN RD</b> <b>PFAFFTOWN, NC 27040</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.145	Priority creditor's name and mailing address <b>LEACH, ROGER R</b> <b>4127 CHANDLER DR</b> <b>WILMINGTON, NC 28405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$197.76</b>	<b>\$197.76</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.146	Priority creditor's name and mailing address <b>LEE, MARY K</b> <b>106 SOMMERSET DRIVE</b> <b>CLAYTON, NC 27520</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
<hr/>		
2.147	Priority creditor's name and mailing address <b>LEFTWICH, CHARLES A</b> <b>49 GRISSINGER CT</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$551.75</b> <b>\$551.75</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.148	Priority creditor's name and mailing address <b>LEGGINS, JOHNNY W</b> <b>1736 MCCOMBS ST</b> <b>NEWTON, NC 28658</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$208.80</b> <b>\$208.80</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.149	Priority creditor's name and mailing address <b>LEMON, TIMOTHY M</b> <b>913 APPLOOSA TRAIL</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$216.00</b> <b>\$216.00</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.150	Priority creditor's name and mailing address <b>LEMONDS, JERRY</b> <b>2015 WOODTOP COURT</b> <b>CHARLOTTE, NC 28214</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$232.56</b> <b>\$232.56</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)		
	Name				

  

2.151	Priority creditor's name and mailing address <b>LEMONS, KELBY L</b> <b>213 WHISPERING CREEK RD</b> <b>KING, NC 27021</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$500.00</b>	<b>\$500.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.152	Priority creditor's name and mailing address <b>LINDSAY, WILLIAM H</b> <b>1005 HADLEY MEADOWS DR</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.153	Priority creditor's name and mailing address <b>LONG, JAMES H</b> <b>237 RASCOE-DAMERON RD</b> <b>BURLINGTON, NC 27217</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$214.32</b>	<b>\$214.32</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.154	Priority creditor's name and mailing address <b>LOWE, DILLON R</b> <b>4765 COOPER ROAD</b> <b>CLEMMONS, NC 27012</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$222.00</b>	<b>\$222.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.155	Priority creditor's name and mailing address <b>LUNSFORD, ROBERT E</b> <b>3551 FRYE BRIDGE ROAD</b> <b>CLEMMONS, NC 27012</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.156	Priority creditor's name and mailing address <b>MADONNA JR, JOHN</b> <b>9125 SAULS RD</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.72</b>	<b>\$228.72</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.157	Priority creditor's name and mailing address <b>MANNARINO, DONALD</b> <b>320 LAMESHUR LANE</b> <b>MONROE, NC 28110</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,266.00</b>	<b>\$1,266.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.158	Priority creditor's name and mailing address <b>MARCOM, GLENWOOD R</b> <b>217 FERN FOREST DR</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$234.00</b>	<b>\$234.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.159	Priority creditor's name and mailing address <b>MARKLE, DEBORAH I</b> <b>4020-C WHIRLAWAY COURT</b> <b>CLEMMONS, NC 27012</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,536.44</b>	<b>\$1,536.44</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.160	Priority creditor's name and mailing address <b>MARSHALL, JANIE LYNN</b> <b>6400 LAKE WHEELER ROAD</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$596.00</b>	<b>\$596.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.161	Priority creditor's name and mailing address <b>MARSHALL, JOHNNY S</b> <b>385 WILL JOHNSON RD</b> <b>THOMASVILLE, NC 27360</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,183.00</b>	<b>\$2,183.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.162	Priority creditor's name and mailing address <b>MATHERLY, JASON</b> <b>203 N. INMAN AVE</b> <b>BESSEMER CITY, NC 28016</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,192.82</b>	<b>\$1,192.82</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.163	Priority creditor's name and mailing address <b>MATHIS, CHARLES E</b> <b>326 STONE POST RD</b> <b>CHARLOTTE, NC 28217</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$207.60</b>	<b>\$207.60</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.164	Priority creditor's name and mailing address <b>MCALLISTER, GREGORY</b> <b>1025 CHEEK FARM ROAD</b> <b>WALNUT COVE, NC 27052</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$901.54</b>	<b>\$901.54</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.165	Priority creditor's name and mailing address <b>MCCALL, CHARLES F</b> <b>412 HAMILTON STREET</b> <b>BURLINGTON, NC 27217</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.24</b>	<b>\$210.24</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.166	Priority creditor's name and mailing address <b>MCCLAMROCH, JOHN</b> <b>169 N SUNSET RIDGE DR</b> <b>WILLOW SPRING, NC 27592</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,982.61</b>	<b>\$1,982.61</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		



Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)		
	Name				

  

2.167	Priority creditor's name and mailing address <b>MCCLENNY, CLARENCE</b> <b>8016 FOXWOOD DR</b> <b>RALEIGH, NC 27615</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.168	Priority creditor's name and mailing address <b>MCCUMMINGS, DONALD</b> <b>4737 SUDSBEE LANE</b> <b>WALKERTOWN, NC 27051</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$221.04</b>	<b>\$221.04</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.169	Priority creditor's name and mailing address <b>MCGHINNIS, PAUL D</b> <b>1572 DAKOTA DRIVE</b> <b>HUDSON, NC 28638</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$215.52</b>	<b>\$215.52</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.170	Priority creditor's name and mailing address <b>MCLAMB, PHILLIP P</b> <b>2597 WHITE MEMORIAL CHIRCH RD</b> <b>WILOW SPRING, NC 27592</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$694.78</b>	<b>\$694.78</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.171	Priority creditor's name and mailing address <b>MCLENDON II, CHARLIE R</b> <b>109 PALMETTO CT</b> <b>GRAHAM, NC 27253</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$198.00</b>	<b>\$198.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.172	Priority creditor's name and mailing address <b>MCNEIL, KENNETH C</b> <b>1903 AUTUMN</b> <b>GREENSBORO, NC 27405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$729.68</b>	<b>\$729.68</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.173	Priority creditor's name and mailing address <b>MEACHAM, MICHAEL K</b> <b>309 FREEMONT COURT</b> <b>GIBSONVILLE, NC 27249</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$211.44</b>	<b>\$211.44</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.174	Priority creditor's name and mailing address <b>MECKLENBURG COUNTY TAX</b> <b>P.O. BOX 71063</b> <b>CHARLOTTE, NC 28272-1063</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$875.92</b>	<b>\$875.92</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.175	Priority creditor's name and mailing address <b>MELAGA, WILLIAM</b> <b>849 RADAR ROAD</b> <b>ARARAT, NC 27007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,287.60</b>	<b>\$1,287.60</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.176	Priority creditor's name and mailing address <b>MENA RODRIGUEZ, MICHAEL B</b> <b>322 W ELM ST</b> <b>GRAHAM, NC 27253</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$977.00</b>	<b>\$977.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.177	Priority creditor's name and mailing address <b>METCALF, CLIFTON A</b> <b>4524 BRASSFIELD DR</b> <b>WINSTON-SALEM, NC 27105</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,856.52</b>	<b>\$2,856.52</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.178	Priority creditor's name and mailing address <b>MILLER, DONALD C</b> <b>2417 PARK LANE</b> <b>CHARLOTTE, NC 28214</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$220.32</b>	<b>\$220.32</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.179	Priority creditor's name and mailing address <b>MILLER, KEITH</b> <b>205 BLUEGRASS DR</b> <b>WARRENTON, NC 27589</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,784.04</b>	<b>\$1,784.04</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.180	Priority creditor's name and mailing address <b>MITCHELL JR, ROY H</b> <b>121 OLD MURPHY ROAD</b> <b>ZEBULON, NC 27597</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,451.26</b>	<b>\$1,451.26</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.181	Priority creditor's name and mailing address <b>MOORE, WILLIAM</b> <b>1724 BUTLER STREET</b> <b>WINSTON-SALEM, NC 27107</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$226.56</b>	<b>\$226.56</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.182	Priority creditor's name and mailing address <b>MORRO, PAUL M</b> <b>11805 EDGEWATER CT</b> <b>RALEIGH, NC 27614</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,526.93</b>	<b>\$1,526.93</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.183	Priority creditor's name and mailing address <b>MOSES JR, MITCHELL</b> <b>1432 FONTANA AVE</b> <b>CHARLOTTE, NC 28206</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$216.00</b>	<b>\$216.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.184	Priority creditor's name and mailing address <b>MOUSER, CAROLYN E</b> <b>2507 CAUDLE STREET</b> <b>GERMANTON, NC 27019</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,659.80</b>	<b>\$1,659.80</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.185	Priority creditor's name and mailing address <b>MUNDY, MICHAEL A</b> <b>1939 EAST 3RD ST</b> <b>WINSTON-SALEM, NC 27101</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$811.00</b>	<b>\$811.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.186	Priority creditor's name and mailing address <b>MURPHY JR, ALBERT S</b> <b>4364 MORNINGSIDE DR</b> <b>WINSTON-SALEM, NC 27106</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.00</b>	<b>\$210.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.187	Priority creditor's name and mailing address <b>NEAL, ROBERT W</b> <b>6360 MILL SPRING LANE</b> <b>BELEWS CREEK, NC 27009</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.188	Priority creditor's name and mailing address <b>NELSON, KENNETH D</b> <b>230 TANBRIDGE ROAD</b> <b>WILMINGTON, NC 28405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$201.12</b>	<b>\$201.12</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.189	Priority creditor's name and mailing address <b>NELSON, MICHAEL L</b> <b>1454 PACK ROAD</b> <b>WALNUT COVE, NC 27052</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$259.20</b>	<b>\$259.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.190	Priority creditor's name and mailing address <b>NEVILLE, RONNIE Y</b> <b>123 BERRINGER LANE</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$278.40</b>	<b>\$278.40</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.191	Priority creditor's name and mailing address <b>NEW HANOVER CO TAX OFFICE</b> <b>P.O. BOX 580070</b> <b>CHARLOTTE, NC 28258-0070</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$28.23</b>	<b>\$28.23</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.192	Priority creditor's name and mailing address <b>NIELSEN, DALE W</b> <b>3647 MAYAPPLE COURT</b> <b>WAKE FOREST, NC 27587</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.193	Priority creditor's name and mailing address <b>NOAH, STEVE N</b> <b>102 EVA CIR</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.194	Priority creditor's name and mailing address <b>NORRIS, KENNETH T</b> <b>6128 LAKE WHEELER RD</b> <b>RALEIGH, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$216.00</b>	<b>\$216.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.195	Priority creditor's name and mailing address <b>NORTH CAROLINA DEPARTMENT OF REVENUE BANKRUPTCY UNIT PO BOX 1168 RALEIGH, NC 27602</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>NOTICE ONLY</b>		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.196	Priority creditor's name and mailing address <b>O'BRIEN, CONSTANCE A 500 PRESSLER STREET WAKE FOREST, NC 27587</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.197	Priority creditor's name and mailing address <b>OSBORNE, JOHN 6505 COLTRANE MILL RD GREENSBORO, NC 27406</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$262.32</b>	<b>\$262.32</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.198	Priority creditor's name and mailing address <b>PARKER II, HAROLD 226 GREENTREE ROAD THOMASVILLE, NC 27360</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,243.15</b>	<b>\$2,243.15</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		



Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.199	Priority creditor's name and mailing address <b>PARKS, JERRY W</b> <b>2418 N CHURCH STREET</b> <b>BURLINGTON, NC 27217</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.200	Priority creditor's name and mailing address <b>PERRY, TERRY J</b> <b>13725 LABARON DRIVE</b> <b>WILLOW SPRING, NC 27592</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$288.00</b>	<b>\$288.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.201	Priority creditor's name and mailing address <b>PHILLIPS, CHARLES B</b> <b>10515 FOX DEN TRL</b> <b>CHARLOTTE, NC 28214</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$216.00</b>	<b>\$216.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.202	Priority creditor's name and mailing address <b>POOLE, THOMAS E</b> <b>410 WINDEMERE ROAD</b> <b>WILMINGTON, NC 28405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$222.48</b>	<b>\$222.48</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
<hr/>		
2.203	Priority creditor's name and mailing address <b>PORTER, DAVID L</b> <b>1350 SPRINGDALE DRIVE</b> <b>BURLINGTON, NC 27215</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$209.76</b> <b>\$209.76</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.204	Priority creditor's name and mailing address <b>RABON, JIMMY L</b> <b>940 WEST COOKSEY DR</b> <b>THOMASVILLE, NC 27360</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$216.00</b> <b>\$216.00</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.205	Priority creditor's name and mailing address <b>REDDICK, KEVIN</b> <b>7075 TURNPIKE RD</b> <b>ARCHDALE, NC 27263</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$2,067.42</b> <b>\$2,067.42</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.206	Priority creditor's name and mailing address <b>REYNOLDS, NEWELL</b> <b>4724 WHITE ROCK ROAD</b> <b>WINSTON-SALEM, NC 27105</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$1,175.80</b> <b>\$1,175.80</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.207	Priority creditor's name and mailing address <b>RILEY, HEATHER</b> <b>2703 RAINS DRIVE</b> <b>HAW RIVER, NC 27258</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,324.80</b>	<b>\$1,324.80</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.208	Priority creditor's name and mailing address <b>ROBERTSON, HARRY P</b> <b>410 MATHER COURT</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$360.00</b>	<b>\$360.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.209	Priority creditor's name and mailing address <b>ROGERS, CHRISTOPHER</b> <b>1769 SANDY CROSS RD</b> <b>BURLINGTON, NC 27217</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,737.28</b>	<b>\$1,737.28</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.210	Priority creditor's name and mailing address <b>ROSS, WILLIAM L</b> <b>1404 BEAR MOUNTAIN RD</b> <b>CHARLOTTE, NC 28214</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$213.84</b>	<b>\$213.84</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)		
	Name				

  

2.211	Priority creditor's name and mailing address <b>RUMFELT, GEORGE M</b> <b>324 MELLON ROAD</b> <b>BELMONT, NC 28012</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$216.00</b>	<b>\$216.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.212	Priority creditor's name and mailing address <b>RYAN, JAMES J</b> <b>7250 LALANDA DRIVE</b> <b>LEWISVILLE, NC 27027</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$216.00</b>	<b>\$216.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.213	Priority creditor's name and mailing address <b>SAINTSING, ARCHIE</b> <b>936 SCENIC WAY</b> <b>THOMASVILLE, NC 27360</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$254.64</b>	<b>\$254.64</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.214	Priority creditor's name and mailing address <b>SAPP, JAMES G</b> <b>200 PRESLEY DR</b> <b>WINSTON-SALEM, NC 27107</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$211.20</b>	<b>\$211.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
2.215	Priority creditor's name and mailing address <b>SCHAEFER II, JOHN</b> <b>279 DEER TRACK DR</b> <b>BURGAW, NC 28425</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$1,156.00</b> <b>\$1,156.00</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.216	Priority creditor's name and mailing address <b>SECRIST, JAMES</b> <b>420 IDLEBROOK DRIVE</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$234.00</b> <b>\$234.00</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.217	Priority creditor's name and mailing address <b>SEWARD, WILLIAM B</b> <b>2421 WICHITA PL</b> <b>GREENSBORO, NC 27405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$216.00</b> <b>\$216.00</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.218	Priority creditor's name and mailing address <b>SHEPHERD, BARRY T</b> <b>7502 SOMERSBY DR</b> <b>SUMMERFIELD, NC 27358</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$210.96</b> <b>\$210.96</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.219	Priority creditor's name and mailing address <b>SHERRILL, AMANDA M</b> <b>7417 HAZELSTONE LANE</b> <b>LELAND, NC 28451</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$619.73</b>	<b>\$619.73</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.220	Priority creditor's name and mailing address <b>SINK, BRADLEY</b> <b>185 WORKMAN RD</b> <b>SNOW CAMP, NC 27349</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,240.80</b>	<b>\$1,240.80</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.221	Priority creditor's name and mailing address <b>SIPE, GARRY</b> <b>2905 SPENCERS GROVE</b> <b>BROWN SUMMIT, NC 27214</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,466.96</b>	<b>\$1,466.96</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.222	Priority creditor's name and mailing address <b>SLIMM, WILLIAM</b> <b>5392 KINGSWELL DRIVE</b> <b>WINSTON-SALEM, NC 27106</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,589.00</b>	<b>\$1,589.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
2.223	Priority creditor's name and mailing address <b>SLOAN, JOSEPH P</b> <b>3412 GREYWOOD DRIVE</b> <b>RALEIGH, NC 27604</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$204.00      \$204.00</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.224	Priority creditor's name and mailing address <b>SMITH, DANNY J</b> <b>105 PINEBURR AVE SE</b> <b>VALDESE, NC 28690</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$2,096.85      \$2,096.85</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.225	Priority creditor's name and mailing address <b>SMITH, DAVID</b> <b>1806 OLD HOLLOW ROAD</b> <b>WALKERTOWN, NC 27051</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$2,094.74      \$2,094.74</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.226	Priority creditor's name and mailing address <b>SMITH, GEORGE E</b> <b>961 PILOT CHURCH ROAD</b> <b>PINNACLE, NC 27043</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$182.64      \$182.64</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.227	Priority creditor's name and mailing address <b>SMITH, JIMMY M</b> <b>2619 ICARD RHODHISS RD</b> <b>CONNELLY SPRINGS, NC 28612</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$216.00</b>	<b>\$216.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.228	Priority creditor's name and mailing address <b>SNOW, TIMOTHY J</b> <b>259 GLORIA DR</b> <b>MOUNT AIRY, NC 27030</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$186.00</b>	<b>\$186.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.229	Priority creditor's name and mailing address <b>SPERBER, STEFFNY</b> <b>4095 OLD HOLLOW RD</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,672.84</b>	<b>\$1,672.84</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.230	Priority creditor's name and mailing address <b>SPIVEY, WILLIAM A</b> <b>5305 KIRKWOOD CT</b> <b>RALEIGH, NC 27609</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$891.00</b>	<b>\$891.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		



Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.231	Priority creditor's name and mailing address <b>STEELE JR, EDDIE K</b> <b>4915 LONGBURN LANE</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.24</b>	<b>\$210.24</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.232	Priority creditor's name and mailing address <b>STEIL, WILLIAM J</b> <b>1817 MACO RD</b> <b>LELAND, NC 28451</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,079.00</b>	<b>\$1,079.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.233	Priority creditor's name and mailing address <b>STEVENS, BERNIE R</b> <b>244 RYAN ROAD</b> <b>MT AIRY, NC 27030</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$183.60</b>	<b>\$183.60</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.234	Priority creditor's name and mailing address <b>STEVENS, THOMAS W</b> <b>974 WOODVILLE ROAD</b> <b>MT AIRY, NC 27030</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$561.65</b>	<b>\$561.65</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
2.235	Priority creditor's name and mailing address <b>SUITS, TIMOTHY</b> <b>6527 CEDARBERRY ROAD</b> <b>TRINITY, NC 27370</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$2,561.50      \$2,561.50</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.236	Priority creditor's name and mailing address <b>SURRY COUNTY TAX COLLECT.</b> <b>P O BOX 576</b> <b>DOBSON, NC 27017-0576</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$25.46      \$25.46</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.237	Priority creditor's name and mailing address <b>SWAFFORD, JOE</b> <b>3257 10TH AVE NE</b> <b>CONOVER, NC 28613</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$224.16      \$224.16</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.238	Priority creditor's name and mailing address <b>TART, CARL RANDOLPH</b> <b>3105 BARBER MILL ROAD</b> <b>CLAYTON, NC 27520</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$234.00      \$234.00</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset?
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.239	Priority creditor's name and mailing address <b>TASISTA, MICHAEL</b> <b>139 S. GORDON DRIVE</b> <b>WINSTON-SALEM, NC 27104</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,166.44</b>	<b>\$1,166.44</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.240	Priority creditor's name and mailing address <b>TAYLOR, RONNY</b> <b>1008 JAPONICA LANE</b> <b>GREENSBORO, NC 27410</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.241	Priority creditor's name and mailing address <b>TAYLOR, WHITNEY L</b> <b>1545 TAYLOR ROAD</b> <b>EAST BEND, NC 27018</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$824.00</b>	<b>\$824.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.242	Priority creditor's name and mailing address <b>TEAGUE, GARY D</b> <b>36 PAR DRIVE</b> <b>GRANITE FALLS, NC 28630</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$215.52</b>	<b>\$215.52</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.243	Priority creditor's name and mailing address <b>THOMAS, JAMES</b> <b>7017 SPLITROCK LANE</b> <b>CHARLOTTE, NC 28214</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$222.48</b>	<b>\$222.48</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.244	Priority creditor's name and mailing address <b>THOMPSON, DOUGLAS F</b> <b>912 PINEY GROVE RD</b> <b>LOT 51-A</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.245	Priority creditor's name and mailing address <b>THOMPSON, RICHARD R</b> <b>6813 MCLEANSVILLE RD</b> <b>MCLEANSVILLE, NC 27301</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$520.69</b>	<b>\$520.69</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.246	Priority creditor's name and mailing address <b>THORNTON JR, BILLIE T</b> <b>20 SANDERS RD</b> <b>BENSON, NC 27504</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

2.247	Priority creditor's name and mailing address <b>THORNTON, NORWOOD</b> <b>1606 BRIDGEPORT TERRACE</b> <b>HIGH POINT, NC 27265</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$401.28</b>	<b>\$401.28</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.248	Priority creditor's name and mailing address <b>THORNTON, TRACY S</b> <b>200 HILLINGTON ROAD</b> <b>GARNER, NC 27529</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,471.00</b>	<b>\$1,471.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.249	Priority creditor's name and mailing address <b>TOPPS, DONALD A</b> <b>99 MAPLEWOOD DRIVE</b> <b>KNIGHTDALE, NC 27545</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$4,101.89</b>	<b>\$4,101.89</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.250	Priority creditor's name and mailing address <b>TOWN OF KERNERSVILLE</b> <b>FINANCE DEPARTMENT</b> <b>P. O. DRAWER 728</b> <b>KERNERSVILLE, NC 27284</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$76.00</b>	<b>\$76.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Auto Supply Company, Inc.**

Case number (if known)

	Name	As of the petition filing date, the claim is:		
2.251	Priority creditor's name and mailing address <b>TYSINGER, JOE D</b> <b>116 VIRGINIA DRIVE</b> <b>THOMASVILLE, NC 27360</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$210.24</b>	<b>\$210.24</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.252	Priority creditor's name and mailing address <b>UHLER, EDWARD</b> <b>1938 HILLDALE DRIVE</b> <b>BURLINGTON, NC 27215</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,297.92</b>	<b>\$1,297.92</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.253	Priority creditor's name and mailing address <b>VANEMAN, ERNEST P</b> <b>104 LEEWAY COURT</b> <b>CLAYTON, NC 27520</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$842.20</b>	<b>\$842.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.254	Priority creditor's name and mailing address <b>VARNER, JASON E</b> <b>281 WENDYS WAY</b> <b>CLEMMONS, NC 27012</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
2.255	Priority creditor's name and mailing address <b>VICKREY, DONALD H</b> <b>2255 LEE DRIVE</b> <b>BURLINGTON, NC 27216</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$214.32</b> <b>\$214.32</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.256	Priority creditor's name and mailing address <b>VIRGINIA TAX</b> <b>OFFICE OF CUSTOMER SERVICE</b> <b>PO BOX 1115</b> <b>RICHMOND, VA 23218-1115</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$0.00</b> <b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>NOTICE ONLY</b>
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.257	Priority creditor's name and mailing address <b>WAKE COUNTY REVENUE DEPT</b> <b>P.O. BOX 580084</b> <b>CHARLOTTE, NC 28258-0084</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$1,176.52</b> <b>\$1,176.52</b>
	Date or dates debt was incurred <b>1/1/17</b>	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.258	Priority creditor's name and mailing address <b>WALKER, LAWRENCE</b> <b>498 GOVERNMENT RD</b> <b>CLAYTON, NC 27520</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$222.00</b> <b>\$222.00</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.259	Priority creditor's name and mailing address <b>WALKER, WILLIAM S</b> <b>5085 STONEPOINT ROAD</b> <b>WALKERTOWN, NC 27051</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$198.00</b>	<b>\$198.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.260	Priority creditor's name and mailing address <b>WALLACE, MICHAEL B</b> <b>245 WOODGREEN DR</b> <b>ABERDEEN, NC 28315</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,467.02</b>	<b>\$1,467.02</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.261	Priority creditor's name and mailing address <b>WARD, RICKY</b> <b>140 MAYNARD DRIVE</b> <b>WINSTON-SALEM, NC 27107</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,031.46</b>	<b>\$2,031.46</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.262	Priority creditor's name and mailing address <b>WATKINS, JEFFREY E</b> <b>437 REGENCY DR</b> <b>WILMINGTON, NC 28412</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		



Debtor	<b>Auto Supply Company, Inc.</b>	Case number (if known)		
	Name			

  

2.263	Priority creditor's name and mailing address <b>WEAVER, GARY</b> <b>4432 MEBANE ROGERS RD</b> <b>MEBANE, NC 27302</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$204.00</b>	<b>\$204.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.264	Priority creditor's name and mailing address <b>WEHRMEYER, ANN</b> <b>438 W. WELLINGTON LANE</b> <b>WALNUT COVE, NC 27106</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,279.08</b>	<b>\$1,279.08</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.265	Priority creditor's name and mailing address <b>WEST, BRIDGET M</b> <b>6455 PATRICK DR NE</b> <b>LELAND, NC 28451</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$199.20</b>	<b>\$199.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.266	Priority creditor's name and mailing address <b>WHEELER, JOSEPH</b> <b>P.O. BOX 57</b> <b>WHITSETT, NC 27377</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,239.95</b>	<b>\$1,239.95</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)		
	Name				

  

2.267	Priority creditor's name and mailing address <b>WHISENANT, BEULAH S 126 WALKER RD MORGANTON, NC 28655</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$219.84</b>	<b>\$219.84</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.268	Priority creditor's name and mailing address <b>WHITE, GREGORY 1036 MURPHY ROAD WALNUT COVE, NC 27052</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,853.56</b>	<b>\$1,853.56</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.269	Priority creditor's name and mailing address <b>WHITE, JAMES 320 BRADFORD DR CHARLOTTE, NC 28208</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$222.00</b>	<b>\$222.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.270	Priority creditor's name and mailing address <b>WHITE, WILLIAM P 2920 WHEAT MEADOW LANE CHARLOTTE, NC 28270</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,069.38</b>	<b>\$2,069.38</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
<hr/>		
2.271	Priority creditor's name and mailing address <b>WHITESELL, LEROY E</b> <b>3311 MARTIN AVE</b> <b>GREENSBORO, NC 27405</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$164.00</b> <b>\$164.00</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.272	Priority creditor's name and mailing address <b>WHITT, JAMES S</b> <b>135 S. TWIN HILL RD</b> <b>CLEMMONS, NC 27012</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$2,857.77</b> <b>\$2,857.77</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.273	Priority creditor's name and mailing address <b>WILLIAMS, JAMES M</b> <b>1007 GORDON WOODS RD</b> <b>WILMINGTON, NC 28411</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$190.80</b> <b>\$190.80</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		
2.274	Priority creditor's name and mailing address <b>WILLIAMS, JAMES R</b> <b>4330 MCCLURE RD</b> <b>CHARLOTTE, NC 28216</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<b>\$222.48</b> <b>\$222.48</b>
<hr/>		
	Date or dates debt was incurred	Basis for the claim:
<hr/>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<hr/>		

Debtor	<b>Auto Supply Company, Inc.</b>		Case number (if known)
	Name		

  

2.275	Priority creditor's name and mailing address <b>WILLIAMS, JEREMY B</b> <b>6001 PHELPS CIRCLE</b> <b>WINSTON-SALEM, NC 27105</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,039.20</b>	<b>\$1,039.20</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.276	Priority creditor's name and mailing address <b>WILLIFORD, STEVEN E</b> <b>452 LIPSCOMB ROAD</b> <b>ANGIER, NC 27501</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,196.00</b>	<b>\$1,196.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.277	Priority creditor's name and mailing address <b>WILSON, RICHARD M</b> <b>4608 CHARLOTTEVILLE RD</b> <b>GREENSBORO, NC 27410</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$208.56</b>	<b>\$208.56</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.278	Priority creditor's name and mailing address <b>WOMACK, DAVID</b> <b>117 WINDOVER LANE</b> <b>WINSTON-SALEM, NC 27107</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,162.54</b>	<b>\$3,162.54</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Auto Supply Company, Inc.</b> <small>Name</small>		Case number (if known)		
2.279	Priority creditor's name and mailing address <b>WOOD, LARRY</b> <b>7740 BROAD STREET</b> <b>RURAL HALL, NC 27045</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		<b>\$228.00</b>	<b>\$228.00</b>
	Date or dates debt was incurred	Basis for the claim:			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.280	Priority creditor's name and mailing address <b>WOODRING, KEVIN</b> <b>2003 PL PROPST ROAD</b> <b>MAIDEN, NC 28650</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		<b>\$1,533.24</b>	<b>\$1,533.24</b>
	Date or dates debt was incurred	Basis for the claim:			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.281	Priority creditor's name and mailing address <b>YERGEAU, COREY J</b> <b>29 MOREHEAD DR</b> <b>WILLOW SPRING, NC 27592</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		<b>\$1,215.00</b>	<b>\$1,215.00</b>
	Date or dates debt was incurred	Basis for the claim:			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.282	Priority creditor's name and mailing address <b>YOST JR, BILLY G</b> <b>316 MOSSY OAK CT</b> <b>LELAND, NC 28451</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		<b>\$1,724.45</b>	<b>\$1,724.45</b>
	Date or dates debt was incurred	Basis for the claim:			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known) _____
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3.1	<b>Nonpriority creditor's name and mailing address</b> <b>1-800-RADIATOR (25)</b> <b>2550 EMPIRE DRIVE</b> <b>UNIT 114</b> <b>WINSTON SALEM, NC 27103</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$195.42</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.2	<b>Nonpriority creditor's name and mailing address</b> <b>311 AUTOMOTIVE</b> <b>113 SALEM AVENUE</b> <b>NEW CASTLE, VA 24127</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$423.42</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.3	<b>Nonpriority creditor's name and mailing address</b> <b>9TH STREET GARAGE</b> <b>110 9TH ST, SW</b> <b>ROANOKE, VA 24016</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$130.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.4	<b>Nonpriority creditor's name and mailing address</b> <b>A1-CARDONE</b> <b>P.O. BOX 827267</b> <b>HTTPS://WWW.CARDONE.COM</b> <b>PHILADELPHIA, PA 19182</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$139,238.15</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.5	<b>Nonpriority creditor's name and mailing address</b> <b>AAA IMPORTS INC.</b> <b>300 SOUTH SPRING STREET</b> <b>WINSTON-SALEM, NC 27101</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$555.33</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.6	<b>Nonpriority creditor's name and mailing address</b> <b>AAMCO OF GARNER</b> <b>546 DYNAMIC DRIVE</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$276.52</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	<b>Nonpriority creditor's name and mailing address</b> <b>AC CORPORATION</b> <b>P.O. BOX 16367</b> <b>GREENSBORO, NC 27416-0367</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,579.52</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.8	<b>Nonpriority creditor's name and mailing address</b> <b>ACE TOOL COMPANY</b> <b>LOCK BOX #536491</b> <b>ATLANTA, GA 30353-6491</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,528.51</b>
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3.9	<b>Nonpriority creditor's name and mailing address</b> <b>ACR LOCKSMITH INC</b> <b>P.O. BOX 5932</b> <b>HIGH POINT, NC 27262</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$82.67</b>
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3.10	<b>Nonpriority creditor's name and mailing address</b> <b>ADP BOX 842875</b> <b>PNC BANK C/O ADP LLC</b> <b>20 COMMERCE WAY, STE 800</b> <b>WOBURN, MA 01801-1057</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Payroll services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,360.56</b>
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3.11	<b>Nonpriority creditor's name and mailing address</b> <b>ADT SECURITY SERVICES, INC.</b> <b>1 TOWN CENTER RD.</b> <b>BOCA RATON, FL 33486</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>0807</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.12	<b>Nonpriority creditor's name and mailing address</b> <b>ADVANCE AUTO PARTS</b> <b>AAP FINANCIAL SERVICES</b> <b>P O BOX 742063</b> <b>ATLANTA, GA 30374-2063</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$105.96</b>
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3.13	<b>Nonpriority creditor's name and mailing address</b> <b>ADVANTAGE WIPING PRODUCTS</b> <b>P O BOX 328</b> <b>SPRING HOPE, NC 27882</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$421.64</b>
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3.14	<b>Nonpriority creditor's name and mailing address</b> <b>ADVICS NORTH AMERICA, INC</b> <b>1650 KINGS VIEW DRIVE</b> <b>LEBANON, OH 45036</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,893.30</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.15	<b>Nonpriority creditor's name and mailing address</b> <b>AIRTEX PRODUCTS LP</b> <b>P O BOX 936312</b> <b>ATLANTA, GA 31193-6312</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,441.10</b>
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3.16	<b>Nonpriority creditor's name and mailing address</b> <b>AISIN WORLD CORP OF AMERI</b> <b>DEPT LA 24254</b> <b>PASADENA, CA 91185-4254</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,695.52</b>
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3.17	<b>Nonpriority creditor's name and mailing address</b> <b>AKEBONO CORPORATION</b> <b>P.O. BOX 3236</b> <b>FARMINGTON, MI 48333</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$64,430.07</b>
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3.18	<b>Nonpriority creditor's name and mailing address</b> <b>ALLIANCE SPORTS GROUP LP</b> <b>P O BOX 203246</b> <b>DALLAS, TX 75320-3246</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$745.20</b>
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3.19	<b>Nonpriority creditor's name and mailing address</b> <b>ALLIGOOD'S GARAGE</b> <b>527 N MARKET STREET</b> <b>WASHINGTON, NC 27889-4422</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,795.29</b>
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3.20	<b>Nonpriority creditor's name and mailing address</b> <b>ALPHA WASTE INDUSTRIES</b> <b>P O BOX 1359</b> <b>WELCOME, NC 27374</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Waste management</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$70.00</b>
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3.21	<b>Nonpriority creditor's name and mailing address</b> <b>ALPHA WASTE MANAGEMENT</b> <b>4157 OLD US HWY 52</b> <b>LEXINGTON, NC 27295</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>2290</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.22	<b>Nonpriority creditor's name and mailing address</b> <b>AMALIE OIL COMPANY</b> <b>P. O. BOX 99744</b> <b>CHICAGO, IL 60690-7544</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$53,373.60</b>
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3.23	<b>Nonpriority creditor's name and mailing address</b> <b>AMERICAN AUTO SUPPLY CO.</b> <b>P. O. BOX 4182</b> <b>ARCHDALE, NC 27263</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,184.36</b>
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3.24	<b>Nonpriority creditor's name and mailing address</b> <b>AMERICAN EXPRESS</b> <b>P O BOX 650448</b> <b>DALLAS, TX 75265-0448</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Credit Card</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$232,537.62</b>
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3.25	<b>Nonpriority creditor's name and mailing address</b> <b>AMERICAN HERITAGE LIFE</b> <b>P.O. BOX 650514</b> <b>DALLAS, TX 75265-0514</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,140.76</b>
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3.26	<b>Nonpriority creditor's name and mailing address</b> <b>AMS AUTOMOTIVE, INC</b> <b>P. O. BOX 790379</b> <b>SAINT LOUIS, MO 63179-0379</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,391.78</b>
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3.27	<b>Nonpriority creditor's name and mailing address</b> <b>APPERSON AUTOMOTIVE</b> <b>1601 APPERSON DRIVE</b> <b>SALEM, VA 24153</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$419.68</b>
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3.28	<b>Nonpriority creditor's name and mailing address</b> <b>APPLIED TELECOM, INC</b> <b>5820 N CHURCH ST STE D</b> <b>PMB 144</b> <b>GREENSBORO, NC 27455</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$722.93</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.29	<b>Nonpriority creditor's name and mailing address</b> <b>ARC3 GASES</b> <b>P O BOX 1708</b> <b>DUNN, NC 28335-1708</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$81.56</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.30	<b>Nonpriority creditor's name and mailing address</b> <b>AT&amp;T</b> <b>C/O BANKRUPTCY</b> <b>4331 COMMUNICATIONS DR</b> <b>FLR 4W</b> <b>DALLAS, TX 75211</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>3009</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.31	<b>Nonpriority creditor's name and mailing address</b> <b>AT&amp;T</b> <b>C/O BANKRUPTCY</b> <b>4331 COMMUNICATIONS DR</b> <b>FLR 4W</b> <b>DALLAS, TX 75211</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>0369</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.32	<b>Nonpriority creditor's name and mailing address</b> <b>AT&amp;T</b> <b>C/O BANKRUPTCY</b> <b>4331 COMMUNICATIONS DR</b> <b>FLR 4W</b> <b>DALLAS, TX 75211</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>1900</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.33	<b>Nonpriority creditor's name and mailing address</b> <b>ATK NORTH AMERICA</b> <b>1102 W N CARRIER PKY</b> <b>STE 100</b> <b>GRAND PRAIRIE, TX 75050</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$10,251.50</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.34	<b>Nonpriority creditor's name and mailing address</b> <b>ATLANTIC TIRE DISTRIBUTOR</b> <b>P O BOX 63382</b> <b>CHARLOTTE, NC 28263-3382</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$667.53</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.35	<b>Nonpriority creditor's name and mailing address</b> <b>AUTO CLIPS &amp; FASTENERS</b> <b>218 SKY SAIL BLVD</b> <b>NEW BERN, NC 28560</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$252.56</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.36	<b>Nonpriority creditor's name and mailing address</b> <b>AUTO SPECIALTIES</b> <b>925 GROVEMONT ROAD</b> <b>RALEIGH, NC 27603</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$272.24</b>
<hr/>			
3.37	<b>Nonpriority creditor's name and mailing address</b> <b>AUTO SUPPLY OF THOMASVILL</b> <b>122 NATIONAL HIGHWAY</b> <b>THOMASVILLE, NC 27360</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$27.01</b>
<hr/>			
3.38	<b>Nonpriority creditor's name and mailing address</b> <b>AUTO VENTSHADE</b> <b>DEPT #2018</b> <b>P.O.BOX 11407</b> <b>BIRMINGHAM, AL 35246-2018</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$247.75</b>
<hr/>			
3.39	<b>Nonpriority creditor's name and mailing address</b> <b>AUTO-PRO</b> <b>P.O. BOX 34190</b> <b>RICHMOND, VA 23234</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,027.06</b>
<hr/>			
3.40	<b>Nonpriority creditor's name and mailing address</b> <b>AUTOBEST INTERNATIONAL</b> <b>2500 TROY AVE</b> <b>SOUTH EL MONTE, CA 91733</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,479.77</b>
<hr/>			
3.41	<b>Nonpriority creditor's name and mailing address</b> <b>AUTOMOTIVE DIST NETWORK</b> <b>DEPT #816</b> <b>MEMPHIS, TN 38148-0816</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$53,243.56</b>
<hr/>			
3.42	<b>Nonpriority creditor's name and mailing address</b> <b>AUTOMOTIVE FASTENERS, INC</b> <b>P.O. BOX 20686</b> <b>GREENSBORO, NC 27420-4859</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$73.43</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.43	<b>Nonpriority creditor's name and mailing address</b> <b>AUTOMOTIVE SERVICE PRODUC</b> <b>P.O. BOX 942</b> <b>BURLINGTON, KY 41005</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,132.60</b>
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3.44	<b>Nonpriority creditor's name and mailing address</b> <b>AUTOMOTIVE SYSTEMS</b> <b>P O BOX 269</b> <b>WILDWOOD, PA 15091</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$138.31</b>
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3.45	<b>Nonpriority creditor's name and mailing address</b> <b>AUTOPART INTERNATIONAL</b> <b>P.O. BOX 419250</b> <b>BOSTON, MA 02241-9250</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$100,706.14</b>
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3.46	<b>Nonpriority creditor's name and mailing address</b> <b>AUTOPLUS AUTO PARTS</b> <b>16741 COLLECTION CENTER D</b> <b>CHICAGO, IL 60693</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$498,120.44</b>
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3.47	<b>Nonpriority creditor's name and mailing address</b> <b>AUTOTEK</b> <b>300 CIRCLE LANE</b> <b>RALEIGH, NC 27603</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$544.98</b>
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3.48	<b>Nonpriority creditor's name and mailing address</b> <b>AUTOZONE, INC</b> <b>P.O. BOX 791409</b> <b>BALTIMORE, MD 21279-1409</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,107.05</b>
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3.49	<b>Nonpriority creditor's name and mailing address</b> <b>BAITY'S DISCOUNT TIRE</b> <b>1081 SALISBURY RIDGE ROAD</b> <b>WINSTON-SALEM, NC 27127</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,720.42</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.50	<b>Nonpriority creditor's name and mailing address</b> <b>BARBOUR'S TRUCK &amp; TRAILER</b> <b>P. O. BOX 20693</b> <b>RALEIGH, NC 27619</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,737.31</b>
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3.51	<b>Nonpriority creditor's name and mailing address</b> <b>BARNES ELECTRIC</b> <b>7388 FOX CHASE DRIVE</b> <b>TRINITY, NC 27370</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$193.00</b>
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3.52	<b>Nonpriority creditor's name and mailing address</b> <b>BASHAM OIL COMPANY</b> <b>2428 ROANOKE AVE</b> <b>ROANOKE, VA 24015</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,733.31</b>
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3.53	<b>Nonpriority creditor's name and mailing address</b> <b>BATTERY TREE</b> <b>P O BOX 427</b> <b>KERNERSVILLE, NC 27285-0427</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16.39</b>
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3.54	<b>Nonpriority creditor's name and mailing address</b> <b>BBB INDUSTRIES, LLC</b> <b>8410 WOLF LAKE DR. #101</b> <b>BARTLETT, TN 38133</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$424,727.77</b>
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3.55	<b>Nonpriority creditor's name and mailing address</b> <b>BCE SOUTH</b> <b>P O BOX 829</b> <b>Daphne, Alabama 36526</b> <b>INDIAN TRAIL, NC 28079</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$243.42</b>
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3.56	<b>Nonpriority creditor's name and mailing address</b> <b>BCI PERFORMANCE WAREHOUSE</b> <b>465 MEMORIAL DR. SE</b> <b>29627 Renaissance Blvd.</b> <b>ATLANTA, GA 30312</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,064.17</b>
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Debtor <b>Auto Supply Company, Inc.</b>		Case number (if known) _____	
Name			
3.57	<b>Nonpriority creditor's name and mailing address</b> <b>BECK/ARNLEY</b> <b>2375 MIDWAY LN</b> <b>SMYRNA, TN 37167</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$486.59</b>
3.58	<b>Nonpriority creditor's name and mailing address</b> <b>BFPE INTERNATIONAL SECUR.</b> <b>P.O. BOX 791045</b> <b>BALTIMORE, MD 21279-1045</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$276.86</b>
3.59	<b>Nonpriority creditor's name and mailing address</b> <b>BILL BLACK CADILLAC, OLDS</b> <b>601 E. BESSEMER AVENUE</b> <b>GREENSBORO, NC 27405</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$244.69</b>
3.60	<b>Nonpriority creditor's name and mailing address</b> <b>BLUECAFFE</b> <b>4995 REYNOLDA RD</b> <b>WINSTON SALEM, NC 27106</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$58.70</b>
3.61	<b>Nonpriority creditor's name and mailing address</b> <b>BOB KING AUTOHAUS</b> <b>5115 NEW CENTRE DRIVE</b> <b>WILMINGTON, NC 28406</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$275.00</b>
3.62	<b>Nonpriority creditor's name and mailing address</b> <b>BOB KING AUTOMOTIVE GROUP</b> <b>1601 SILAS CREEK PARKWAY</b> <b>WINSTON SALEM, NC 27127</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$627.65</b>
3.63	<b>Nonpriority creditor's name and mailing address</b> <b>BRAKE PARTS INC LLC</b> <b>P O BOX 74008089</b> <b>CHICAGO, IL 60674-8089</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$526.91</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.64	<b>Nonpriority creditor's name and mailing address</b> <b>BROTHERS RESEARCH CORP</b> <b>P O BOX 317</b> <b>BURLINGTON, NC 27216</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,659.80</b>
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3.65	<b>Nonpriority creditor's name and mailing address</b> <b>BRYAN CONTRACATING SERVICE</b> <b>816 DEER HOLLOW CT</b> <b>WAKE FOREST, NC 27587</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$120.00</b>
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3.66	<b>Nonpriority creditor's name and mailing address</b> <b>BURLINGTON MUNICIPLE BUILDING</b> <b>P.O. BOX 1358</b> <b>BURLINGTON, NC 27216</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>0172</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.67	<b>Nonpriority creditor's name and mailing address</b> <b>BURLINGTON MUNICIPLE BUILDING</b> <b>P.O. BOX 1358</b> <b>BURLINGTON, NC 27216</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>0102</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.68	<b>Nonpriority creditor's name and mailing address</b> <b>BURLINGTON ROYALS</b> <b>P.O. BOX 1143</b> <b>BURLINGTON, NC 27216</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$400.00</b>
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3.69	<b>Nonpriority creditor's name and mailing address</b> <b>CAPITAL CHRYSLER</b> <b>P O BOX 2089</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,092.79</b>
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3.70	<b>Nonpriority creditor's name and mailing address</b> <b>CAPITAL CITY AUTO LLC</b> <b>1445 MECHANICAL BLVD.</b> <b>GARNER, NC 27252</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$436.31</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.71	<b>Nonpriority creditor's name and mailing address</b> <b>CAPITAL FORD</b> <b>P.O. BOX 4069</b> <b>WILMINGTON, NC 28406</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,388.10</b>
3.72	<b>Nonpriority creditor's name and mailing address</b> <b>CAROLINA HANDLING LLC</b> <b>P.O. BOX 890352</b> <b>CHARLOTTE, NC 28289-0352</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$333.71</b>
3.73	<b>Nonpriority creditor's name and mailing address</b> <b>CAROLINA IND BATTERY INC</b> <b>P.O. BOX 298</b> <b>PFAFFTOWN, NC 27040</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,699.17</b>
3.74	<b>Nonpriority creditor's name and mailing address</b> <b>CAROLINA KIA OF HP</b> <b>2431 N. MAIN STREET</b> <b>HIGH POINT, NC 27262</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$108.74</b>
3.75	<b>Nonpriority creditor's name and mailing address</b> <b>CAROLINAS AUTO SUPPLY HOU</b> <b>2135 TIPTON DRIVE</b> <b>P O BOX 36409</b> <b>CHRLLOTTE, NC 28236</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$79.64</b>
3.76	<b>Nonpriority creditor's name and mailing address</b> <b>CENTURYLINK LEGAL</b> <b>100 CENTURYLINK DRIVE</b> <b>MONROE, LA 71203</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>4667</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.77	<b>Nonpriority creditor's name and mailing address</b> <b>CHASON DIESEL SEVICES</b> <b>P O BOX 1126</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$709.15</b>



Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.78	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF GREENSBORO</b> <b>300 WEST WASHINGTON STREET</b> <b>GREENSBORO, NC 27401</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>4300</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.79	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF HICKORY</b> <b>DUMPSTER RENTAL</b> <b>P O BOX 580069</b> <b>CHARLOTTE, NC 28258-0069</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$69.50</b>
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3.80	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF HICKORY</b> <b>PO BOX 580069</b> <b>CHARLOTTE, NC 28258-0069</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$43.52</b>
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3.81	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF HICKORY UTILITIES</b> <b>76 NORTH CENTER STREET</b> <b>HICKORY, NC 28601</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>7069</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.82	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF HICKORY UTILITIES</b> <b>76 NORTH CENTER STREET</b> <b>HICKORY, NC 28601</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>2527</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.83	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF HIGH POINT UTILITIES</b> <b>P.O. BOX 230</b> <b>HIGH POINT, NC 27261</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>1207</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.84	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF MOUNT AIRY</b> <b>P.O. BOX 1725</b> <b>MOUNT AIRY, NC 27030-1725</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$66.41</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known) _____
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3.85	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF MT AIRY</b> <b>P.O. BOX 1725</b> <b>MOUNT AIRY, NC</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21.00</b>
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3.86	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF RALEIGH UTILITIES</b> <b>222 W. HARGETT ST.</b> <b>CHARLOTTE, NC 28202</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>0000</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.87	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF WINSTON-SALEM UTILITIES</b> <b>101 N. MAIN STREET</b> <b>WINSTON-SALEM, NC 27101</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>2754</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.88	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF WINSTON-SALEM UTILITIES</b> <b>101 N. MAIN STREET</b> <b>WINSTON-SALEM, NC 27101</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>3364</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.89	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF WINSTON-SALEM UTILITIES</b> <b>101 N. MAIN STREET</b> <b>WINSTON-SALEM, NC 27101</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>3017</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.90	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF WINSTON-SALEM UTILITIES</b> <b>101 N. MAIN STREET</b> <b>WINSTON-SALEM, NC 27101</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>0915</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.91	<b>Nonpriority creditor's name and mailing address</b> <b>CITY OF WINSTON-SALEM UTILITIES</b> <b>101 N. MAIN STREET</b> <b>WINSTON-SALEM, NC 27101</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>8020</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.92	<b>Nonpriority creditor's name and mailing address</b> <b>CLEARPLUS INC.</b> <b>97 DEWITT STREET</b> <b>GARFIELD, NJ 07026</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,898.75</b>
<hr/>			
3.93	<b>Nonpriority creditor's name and mailing address</b> <b>COASTAL EQUIPMENT INC</b> <b>469 BELT ROAD</b> <b>HAMPSTEAD, NC 28443</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,600.00</b>
<hr/>			
3.94	<b>Nonpriority creditor's name and mailing address</b> <b>CRC INDUSTRIES, INC.</b> <b>P.O. BOX 8500-S 6150</b> <b>PHILADELPHIA, PA 19178</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,575.40</b>
<hr/>			
3.95	<b>Nonpriority creditor's name and mailing address</b> <b>CREECH AUTO SALES</b> <b>3209 BENSON ROAD</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$450.99</b>
<hr/>			
3.96	<b>Nonpriority creditor's name and mailing address</b> <b>CRESCENT FORD</b> <b>100 OLD WINSTON ROAD</b> <b>P. O.BOX 5628</b> <b>HIGH POINT, NC 27262</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$292.65</b>
<hr/>			
3.97	<b>Nonpriority creditor's name and mailing address</b> <b>CROWN AUTOMOTIVE GROUP</b> <b>445 ATLANTA SOUTH PARKWAY</b> <b>SUITE # 135</b> <b>COLLEGE PARK, GA 30349-5908</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,076.87</b>
<hr/>			
3.98	<b>Nonpriority creditor's name and mailing address</b> <b>CRP INDUSTRIES, INC.</b> <b>P.O. BOX 33181</b> <b>NEWARK, NJ 07188-3181</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$55,013.72</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.99	<b>Nonpriority creditor's name and mailing address</b> <b>CRYSTAL SPRINGS</b> <b>P.O. BOX 660579</b> <b>DALLAS, TX 75266-0579</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.75</b>
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3.100	<b>Nonpriority creditor's name and mailing address</b> <b>CUSTOM BUSINESS PRINTING</b> <b>P. O. BOX 13547</b> <b>GREENSBORO, NC 27415-3547</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,266.33</b>
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3.101	<b>Nonpriority creditor's name and mailing address</b> <b>D&amp;E CAR EXCHANGE INC</b> <b>6220 MARKET STREET</b> <b>WILMINGTON, NC 28289</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,037.23</b>
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3.102	<b>Nonpriority creditor's name and mailing address</b> <b>DASH DESIGN</b> <b>615 W KNOX ROAD</b> <b>TEMPE, AZ 85284</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$426.81</b>
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3.103	<b>Nonpriority creditor's name and mailing address</b> <b>DAVID WESTCOTT BUICK/PONT</b> <b>P O BOX 1598</b> <b>BURLINGTON, NC 27216-1598</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$208.46</b>
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3.104	<b>Nonpriority creditor's name and mailing address</b> <b>DELL CORNING CORPORATION</b> <b>575 JOHN DODD RD</b> <b>SPARTANBURG, SC 29303</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,107.35</b>
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3.105	<b>Nonpriority creditor's name and mailing address</b> <b>DENSO PRODUCTS &amp; SERVICES</b> <b>P.O. BOX 601009</b> <b>PASADENA, CA 91189-1009</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$141,947.53</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.106	<b>Nonpriority creditor's name and mailing address</b> <b>DICK SHIRLEY-(11)</b> <b>P O BOX 480</b> <b>BURLINGTON, NC 27216-0480</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$42.49</b>
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3.107	<b>Nonpriority creditor's name and mailing address</b> <b>DICK SHIRLEY-(17)</b> <b>P O BOX 480</b> <b>BURLINGTON, NC 27216-0480</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$200.97</b>
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3.108	<b>Nonpriority creditor's name and mailing address</b> <b>DIESEL ENGINE &amp; REPAIR</b> <b>1547 GRAHAM-HOPEDALE ROAD</b> <b>BURLINGTON, NC 27217</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$36.70</b>
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3.109	<b>Nonpriority creditor's name and mailing address</b> <b>DIESEL EQUIPMENT COMPANY</b> <b>P O BOX 538213</b> <b>ATLANTA, GA 30353</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$169.90</b>
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3.110	<b>Nonpriority creditor's name and mailing address</b> <b>DNJ ENGINE COMPONENTS-18</b> <b>FILE 50186</b> <b>LOS ANGELES, CA 90074-0186</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,867.29</b>
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3.111	<b>Nonpriority creditor's name and mailing address</b> <b>DOUGLAS BATTERY &amp; AUTO CARE</b> <b>575 NORTH BROAD ST</b> <b>WINSTON-SALEM, NC 27101</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13.45</b>
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3.112	<b>Nonpriority creditor's name and mailing address</b> <b>DOVER CYLINDER HEAD SERVI</b> <b>1489 CEDAR LANE</b> <b>GREENVILLE, SC 29617</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,555.00</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.113	<b>Nonpriority creditor's name and mailing address</b> <b>DPAC INVESTMENTS INC</b> <b>6201 MARKET STREET</b> <b>WILMINGTON, NC 28405</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20.00</b>
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3.114	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>9927</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.115	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>9925</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.116	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>9924</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOITCE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.117	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>5033</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.118	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>9561</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.119	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>7753</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.120	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>8763</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.121	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>5176</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.122	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>6705</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.123	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>7916</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.124	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>7605</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.125	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>3874</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.126	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>7972</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known) _____
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3.127	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>7571</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.128	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>7575</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.129	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>0723</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.130	<b>Nonpriority creditor's name and mailing address</b> <b>DUKE POWER BANKRUPTCY DEPT.</b> <b>526 S. CHURCH STREET</b> <b>CHARLOTTE, NC 28202</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>1233</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.131	<b>Nonpriority creditor's name and mailing address</b> <b>DUTY TIRE</b> <b>405 TRYON ROAD</b> <b>RALEIGH, NC 27603</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$881.24</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.132	<b>Nonpriority creditor's name and mailing address</b> <b>E-Z GLASS INC</b> <b>503 W GARNER ROAD</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$193.05</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.133	<b>Nonpriority creditor's name and mailing address</b> <b>EAST PENN MFG CO, INC</b> <b>P O BOX 784191</b> <b>PHILADELPHIA, PA 19178-4191</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$24,428.34</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.134	<b>Nonpriority creditor's name and mailing address</b> <b>EDWIN W JONES</b> <b>110 STEEPLE HEIGHTS LANE</b> <b>MORGANTON, NC 28655</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$280.86</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.135	<b>Nonpriority creditor's name and mailing address</b> <b>ENGINE PARTS WAREHOUSE</b> <b>P O BOX 856300</b> <b>DEPT # 146</b> <b>LOUISVILLE, KY 40285</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$10.78</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.136	<b>Nonpriority creditor's name and mailing address</b> <b>ENVIRO-MASTER SERVICES</b> <b>PO BOX 12350</b> <b>CHARLOTTE, NC 28220</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$275.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Waste Management</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.137	<b>Nonpriority creditor's name and mailing address</b> <b>EPICOR SOFTWARE CORP</b> <b>P.O. BOX 671069</b> <b>DALLAS, TX 75267-1069</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$23,876.78</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>IT Services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.138	<b>Nonpriority creditor's name and mailing address</b> <b>ESTES EXPRESS LINES</b> <b>P.O. BOX 25612</b> <b>RICHMOND, VA 23260-5612</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$663.26</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.139	<b>Nonpriority creditor's name and mailing address</b> <b>EVERETT CHEVROLET, INC.</b> <b>161 HIGHWAY 70 SE</b> <b>HICKORY, NC 28601</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,081.26</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140	<b>Nonpriority creditor's name and mailing address</b> <b>EXCALIBUR</b> <b>4820 BETHANIA STATION RD</b> <b>WINSTON SALEM, NC 27105</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$610.90</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.141	<b>Nonpriority creditor's name and mailing address</b> <b>FAMILY AUTO SERVICE</b> <b>101 ST MARY'S ST</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,205.23</b>
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3.142	<b>Nonpriority creditor's name and mailing address</b> <b>FASTENAL COMPANY</b> <b>PO BOX 1286</b> <b>WINONA, MN 55987-1286</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$133.79</b>
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3.143	<b>Nonpriority creditor's name and mailing address</b> <b>FCS AUTOMOTIVE</b> <b>31800 RESEARCH PARK DRIVE</b> <b>MADISON HEIGHTS, MI 48071</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$30,245.82</b>
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3.144	<b>Nonpriority creditor's name and mailing address</b> <b>FEDERAL EXPRESS CORP.</b> <b>P.O. BOX 371461</b> <b>PITTSBURGH, PA 15250-7461</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Delivery services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$811.47</b>
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3.145	<b>Nonpriority creditor's name and mailing address</b> <b>FEDERAL-MOGUL CORPORATION</b> <b>P.O. BOX 636438</b> <b>CINCINNATI, OH 45263-6438</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$146,416.91</b>
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3.146	<b>Nonpriority creditor's name and mailing address</b> <b>FINISHMASTER, INC.</b> <b>1643 SOLUTIONS CENTER</b> <b>CHICAGO, IL 60677-1006</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$233.12</b>
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3.147	<b>Nonpriority creditor's name and mailing address</b> <b>FJC, INC.</b> <b>101 COMMERCIAL DRIVE</b> <b>MOORESVILLE, NC 28115</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,271.92</b>
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Debtor <b>Auto Supply Company, Inc.</b>		Case number (if known) _____	
Name			
3.148	<b>Nonpriority creditor's name and mailing address</b> <b>FLOW AUTOMOTIVE CENTER</b> <b>1400 SOUTH STRATFORD ROAD</b> <b>WINSTON-SALEM, NC 27103</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$214.76</b>
3.149	<b>Nonpriority creditor's name and mailing address</b> <b>FLOW BMW-MIMI</b> <b>2565 PETERS CREEK PARKWAY</b> <b>WINSTON-SALEM, NC 27127</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$82.52</b>
3.150	<b>Nonpriority creditor's name and mailing address</b> <b>FLOW CHEVROLET</b> <b>1400 S. STRATFORD RD</b> <b>WINSTON-SALEM, NC 27103</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$25.67</b>
3.151	<b>Nonpriority creditor's name and mailing address</b> <b>FLOW HONDA</b> <b>ATTN: BRENDA A/P</b> <b>2600 PETERS CREEK PKWY</b> <b>WINSTON-SALEM, NC 27127</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$288.06</b>
3.152	<b>Nonpriority creditor's name and mailing address</b> <b>FLOW LEXUS</b> <b>805 JONESTOWN ROAD</b> <b>WINSTON-SALEM, NC 27103</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$42.08</b>
3.153	<b>Nonpriority creditor's name and mailing address</b> <b>FRED JONES ENTERPRISES</b> <b>6200 SW 29TH STREET</b> <b>SUITE A</b> <b>OKLAHOMA CITY, OK 73179</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$42,897.56</b>
3.154	<b>Nonpriority creditor's name and mailing address</b> <b>G &amp; K SERVICES</b> <b>P O BOX677057</b> <b>DALLAS, TX 75267-7057</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$33.11</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.155	<b>Nonpriority creditor's name and mailing address</b> <b>G J HOPKINS INC</b> <b>ATTN: JEANETTE BLAIR</b> <b>P.O. BOX 12467</b> <b>ROANOKE, VA 24025</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$315.84</b>
<hr/>			
3.156	<b>Nonpriority creditor's name and mailing address</b> <b>GARNER AUTO INSPECTIONS</b> <b>1100 W GARNER ROAD</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,759.58</b>
<hr/>			
3.157	<b>Nonpriority creditor's name and mailing address</b> <b>GARNER AUTO SPECIALISTS</b> <b>250 NEW FIDELITY CENTER</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$763.08</b>
<hr/>			
3.158	<b>Nonpriority creditor's name and mailing address</b> <b>GARNER AUTO SPECIALISTS</b> <b>1530 BENSON ROAD</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$173.37</b>
<hr/>			
3.159	<b>Nonpriority creditor's name and mailing address</b> <b>GB REMANUFACTURING INC</b> <b>2040 E CHERRY INDUSTRIAL</b> <b>LONG BEACH, CA 90805-4410</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,206.95</b>
<hr/>			
3.160	<b>Nonpriority creditor's name and mailing address</b> <b>GC&amp;F ENTERPRISE</b> <b>27 RIVER BLUFF</b> <b>HOSCHSTON, GA 30548</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$862.27</b>
<hr/>			
3.161	<b>Nonpriority creditor's name and mailing address</b> <b>GEM LOGISTICS, INC</b> <b>P.O. BOX 35382</b> <b>GREENSBORO, NC 27425</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,090.00</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.162	<b>Nonpriority creditor's name and mailing address</b> <b>GENERA CORPORATION</b> <b>P O BOX 205188</b> <b>DALLAS, TX 75320-5188</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,733.29</b>
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3.163	<b>Nonpriority creditor's name and mailing address</b> <b>GLOBAL PARTS DISTRIBUTION</b> <b>P O BOX 3045</b> <b>MACON, GA 31205</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$235,304.16</b>
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3.164	<b>Nonpriority creditor's name and mailing address</b> <b>GM SERVICE PARTS OPERATIO</b> <b>P. O. BOX 905053</b> <b>CHARLOTTE, NC 28290-5053</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$159.00</b>
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3.165	<b>Nonpriority creditor's name and mailing address</b> <b>GMB NORTH AMERICA</b> <b>100 HERROD BLVD.</b> <b>DAYTON, NJ 08810</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,402.94</b>
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3.166	<b>Nonpriority creditor's name and mailing address</b> <b>GRAINGER</b> <b>DEPT 808953830</b> <b>PALATINE, IL 60038-0001</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$57.94</b>
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3.167	<b>Nonpriority creditor's name and mailing address</b> <b>GREEN FORD LINCOLN</b> <b>3800 W WENDOVER AVE.</b> <b>GREENSBORO, NC 27407</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$593.05</b>
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3.168	<b>Nonpriority creditor's name and mailing address</b> <b>GSP NORTH AMERICA</b> <b>P.O. BOX 161690</b> <b>BOILING SPRINGS, SC 29316</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$82,799.96</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.169	<b>Nonpriority creditor's name and mailing address</b> <b>HALO BRANDED SOLUTIONS</b> <b>3182 MOMENTUM PLACE</b> <b>CHICAGO, IL 60689-5331</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$414.68</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.170	<b>Nonpriority creditor's name and mailing address</b> <b>HENNESSY INDUSTRIES INC.</b> <b>P. O. BOX 91492</b> <b>CHICAGO, IL 60693</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$3,748.69</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.171	<b>Nonpriority creditor's name and mailing address</b> <b>HILL'S AUTO SERVICE</b> <b>3612 BENSON ROAD</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$862.62</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.172	<b>Nonpriority creditor's name and mailing address</b> <b>HINSHAW'S CHEVELLE PARTS</b> <b>1248 NC HWY 87 NORTH</b> <b>ELON, NC 27244</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$110.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.173	<b>Nonpriority creditor's name and mailing address</b> <b>HITACHI AUTOMOTIVE SYSTEM</b> <b>AMERICAS, INC</b> <b>DRAWER CS198-281</b> <b>ATLANTA, GA 30384-8281</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$5,867.80</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.174	<b>Nonpriority creditor's name and mailing address</b> <b>HOCUTT'S AUTO SERVICE</b> <b>324 SHERWEE DRIVE</b> <b>RALEIGH, NC 27603</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$223.60</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.175	<b>Nonpriority creditor's name and mailing address</b> <b>HUDSON'S HARDWARE INC</b> <b>305 BENSON ROAD</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$17.47</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.176	<b>Nonpriority creditor's name and mailing address</b> <b>ILDERTON DODGE-CHRY., PLY</b> <b>P. O. BOX 350</b> <b>HIGH POINT, NC 27261</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$24.50</b>
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3.177	<b>Nonpriority creditor's name and mailing address</b> <b>IMPORT PARTS 1220(6)</b> <b>921 PETERS CREEK PARKWAY</b> <b>WINSTON SALEM, NC 27103</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$72.72</b>
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3.178	<b>Nonpriority creditor's name and mailing address</b> <b>IMPORT PARTS 1270(16)</b> <b>921 PETERS CREEK PARKWAY</b> <b>WINSTON SALEM, NC 27103</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$32.65</b>
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3.179	<b>Nonpriority creditor's name and mailing address</b> <b>INDEPENDENT PROJECT MANAG</b> <b>301 NORTH MAIN STREET</b> <b>SUITE 2502</b> <b>WINSTON-SALEM, NC 27101</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$475.00</b>
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3.180	<b>Nonpriority creditor's name and mailing address</b> <b>INDOFF INCORPORATED</b> <b>P.O. BOX 842808</b> <b>KANSAS CITY, MO 64184-2808</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$106.09</b>
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3.181	<b>Nonpriority creditor's name and mailing address</b> <b>INFOTRAC</b> <b>200 NORTH PALMETTO STREET</b> <b>LEESBURG, FL 34748</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$410.00</b>
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3.182	<b>Nonpriority creditor's name and mailing address</b> <b>INNOVATIVE MACHINE &amp; SUPP</b> <b>820 ST. LOUIS AVE</b> <b>VALLEY PARK, MO 63088</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$92.58</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.183	<b>Nonpriority creditor's name and mailing address</b> <b>INTEGRATED SUPPLY NETWK18</b> <b>P.O. BOX 405157</b> <b>ATLANTA, GA 30384-5157</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$226.89</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.184	<b>Nonpriority creditor's name and mailing address</b> <b>INTEGRATED SUPPLY NETWORK</b> <b>P.O. BOX 405157</b> <b>ATLANTA, GA 30384-5157</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$4,398.22</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.185	<b>Nonpriority creditor's name and mailing address</b> <b>ITW PERMATEX, INC.</b> <b>P.O. BOX 2174</b> <b>CAROL STREAM, IL 60132-2174</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$5,841.38</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.186	<b>Nonpriority creditor's name and mailing address</b> <b>JEFF GORDON CHEVROLET</b> <b>228 SOUTH COLLEGE RD</b> <b>WILMINGTON, NC 28403</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$13,339.96</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.187	<b>Nonpriority creditor's name and mailing address</b> <b>JERRY JOHNSON MOTORS</b> <b>3885 N PATTERSON</b> <b>WINSTON-SALEM, NC 27105</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$125.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.188	<b>Nonpriority creditor's name and mailing address</b> <b>JOE BAKER EQUIPMENT SALES</b> <b>1000 DEVILS BACKBONE ROAD</b> <b>CINCINNATI, OH 45233</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$403.71</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.189	<b>Nonpriority creditor's name and mailing address</b> <b>JOEY LEE</b> <b>13513 US HWY70 BUS. WEST</b> <b>CLAYTON, NC 27520</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,103.21</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.190	<b>Nonpriority creditor's name and mailing address</b> <b>JOHN MCCLAMROCH</b> <b>169 N SUNSET RIDGE DR</b> <b>WILLOW SPRING, NC 27592</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$103.00</b>
<hr/>			
3.191	<b>Nonpriority creditor's name and mailing address</b> <b>JOHNSON &amp; TIPTON CYLINDER</b> <b>HEAD REPAIR</b> <b>P O BOX 546</b> <b>GIBSON, NC 28343</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,626.10</b>
<hr/>			
3.192	<b>Nonpriority creditor's name and mailing address</b> <b>JOSEPH C WOODARD PRINTING</b> <b>2815 S SAUNDERS ST</b> <b>RALEIGH, NC 27603</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$85.64</b>
<hr/>			
3.193	<b>Nonpriority creditor's name and mailing address</b> <b>KENNEDY OFFICE SUPPLY CO</b> <b>4211-A ATLANTIC AVE</b> <b>RALEIGH, NC 27604</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,128.75</b>
<hr/>			
3.194	<b>Nonpriority creditor's name and mailing address</b> <b>KENNEDY OIL COMPANY, INC.</b> <b>P. O. BOX 5349</b> <b>HIGH POINT, NC 27262</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$43.20</b>
<hr/>			
3.195	<b>Nonpriority creditor's name and mailing address</b> <b>KERNERSVILLE DODGE, INC.</b> <b>950 HIGHWAY 66 SOUTH</b> <b>KERNERSVILLE, NC 27284</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$95.22</b>
<hr/>			
3.196	<b>Nonpriority creditor's name and mailing address</b> <b>KEY JR, CHARLES</b> <b>197 HAYWOOD DRIVE</b> <b>ADVANCE, NC 27006</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$235,850.00</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.197	<b>Nonpriority creditor's name and mailing address</b> <b>KEY MERCHANDISING-17</b> <b>125 WEST TRADE STREET</b> <b>SANFORD, NC 27330</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,395.14</b>
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3.198	<b>Nonpriority creditor's name and mailing address</b> <b>KEYSTONE AUTO. IND. (17)</b> <b>P O BOX 7441668</b> <b>ATLANTA, GA 30374-1668</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$659.29</b>
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3.199	<b>Nonpriority creditor's name and mailing address</b> <b>KEYSTONE AUTOMOTIV 93813</b> <b>P. O. BOX 417450</b> <b>BOSTON, MA 02241-7450</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,367.07</b>
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3.200	<b>Nonpriority creditor's name and mailing address</b> <b>KLINGSPOR ABRASIVES INC</b> <b>PO BOC 2367</b> <b>HICKORY, NC 28603-2367</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$134.03</b>
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3.201	<b>Nonpriority creditor's name and mailing address</b> <b>KYB AMERICA, LLC</b> <b>7868 SOLUTION CENTER</b> <b>ADDISON, IL 60601</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$57,600.24</b>
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3.202	<b>Nonpriority creditor's name and mailing address</b> <b>LAND-TEK GMS, INC.</b> <b>920 HIGHWAY 801 NORTH</b> <b>ADVANCE, NC 27006</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$326.00</b>
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3.203	<b>Nonpriority creditor's name and mailing address</b> <b>LEITH JAGUAR</b> <b>ATTN: ACCOUNTS PAYABLE</b> <b>P.O. BOX 40110</b> <b>RALEIGH, NC 27629</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$22.36</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.204	<b>Nonpriority creditor's name and mailing address</b> <b>LEITH, INC</b> <b>5601 CAPITAL BOULEVARD</b> <b>RALEIGH, NC 27616</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$50.04</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.205	<b>Nonpriority creditor's name and mailing address</b> <b>LIBERTY ENGINE PARTS</b> <b>3250 SOUTH 76TH STREET</b> <b>PHILADELPHIA, PA 19153</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$233.53</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.206	<b>Nonpriority creditor's name and mailing address</b> <b>LIQUID SUNSHINE COFFEE</b> <b>P O BOX 1398</b> <b>MEBANE, NC 27302</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$40.75</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.207	<b>Nonpriority creditor's name and mailing address</b> <b>MANN &amp; HUMMEL PUROLATOR</b> <b>FILTERS LLC</b> <b>39270 TREASURY CENTER</b> <b>CHICAGO, IL 60694-9200</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,148.04</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.208	<b>Nonpriority creditor's name and mailing address</b> <b>MANN AND HUMMEL FILTRATIO</b> <b>FKA WIX FILTRATION CORP</b> <b>P.O. BOX 73071</b> <b>CHICAGO, IL 60673-7071</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$3,079.73</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.209	<b>Nonpriority creditor's name and mailing address</b> <b>MARSH &amp; MCLENNAN AGENCY</b> <b>3625 N ELM STREET</b> <b>P.O. BOX 9375</b> <b>GREENSBORO, NC 27429-0375</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$30,910.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.210	<b>Nonpriority creditor's name and mailing address</b> <b>MERCEDES BENZ OF THE TRI.</b> <b>691 JONESTOWN ROAD</b> <b>WINSTON-SALEM, NC 27103</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$117.91</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.211	<b>Nonpriority creditor's name and mailing address</b> <b>MERCHANTS CREDIT BUREAU</b> <b>P.O. BOX 1588</b> <b>AUGUSTA, GA 30903-1588</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$60.00</b>
<hr/>			
3.212	<b>Nonpriority creditor's name and mailing address</b> <b>MEVOTECH LP</b> <b>240 BRIDGELAND AVENUE</b> <b>TORONTO, ON</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16,657.82</b>
<hr/>			
3.213	<b>Nonpriority creditor's name and mailing address</b> <b>MID-STATE FORKLIFT, INC</b> <b>P O BOX 4007</b> <b>ARCHDALE, NC 27263</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$257.27</b>
<hr/>			
3.214	<b>Nonpriority creditor's name and mailing address</b> <b>MIDTRONICS, INC.</b> <b>7000 MONROE STREET</b> <b>WILLOWBROOK, IL 60527</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,018.38</b>
<hr/>			
3.215	<b>Nonpriority creditor's name and mailing address</b> <b>MODERN AUTOMOTIVE 2100470</b> <b>P O BOX 1770</b> <b>CLEMMONS, NC 27012-1770</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17.46</b>
<hr/>			
3.216	<b>Nonpriority creditor's name and mailing address</b> <b>MODERN IMPRESSION PRODUCT</b> <b>107-K CREEK RIDGE ROAD</b> <b>GREENSBORO, NC 27406</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$149.79</b>
<hr/>			
3.217	<b>Nonpriority creditor's name and mailing address</b> <b>MURRAY'S TIRE</b> <b>1200-1202 S SAUNDERS ST</b> <b>RALEIGH, NC 27603</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,458.40</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.218	<b>Nonpriority creditor's name and mailing address</b> <b>NAPA AUTO PARTS (11)</b> <b>GENUINE PARTS CO (1747)</b> <b>P O BOX 409043</b> <b>ATLANTA, GA 30384-9043</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,504.19</b>
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3.219	<b>Nonpriority creditor's name and mailing address</b> <b>NAPA OF ROXBORO</b> <b>P O BOX 1359</b> <b>ROXBORO, NC 27573</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$81.06</b>
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3.220	<b>Nonpriority creditor's name and mailing address</b> <b>NELSON'S TIRE</b> <b>1402 GARNER ROAD</b> <b>RALEIGH, NC 27610</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$376.29</b>
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3.221	<b>Nonpriority creditor's name and mailing address</b> <b>NETWORK PRODUCTS LLC</b> <b>200 ENTERPRISE ROAD</b> <b>SOMERVILLE, TN 38068</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$46,886.82</b>
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3.222	<b>Nonpriority creditor's name and mailing address</b> <b>NORTHSIDE CAR WASH</b> <b>3718 N PATTERSON AVENUE</b> <b>WINSTON SALEM, NC 27105</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$185.00</b>
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3.223	<b>Nonpriority creditor's name and mailing address</b> <b>OLD DOMINION FREIGHT LINE</b> <b>P.O. BOX 198475</b> <b>ATLANTA, GA 30384-8475</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Carrier Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,702.76</b>
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3.224	<b>Nonpriority creditor's name and mailing address</b> <b>OMEGA ENVIRONMENTAL TECH</b> <b>P.O. BOX 677629</b> <b>DALLAS, TX 75267-7629</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$48.35</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.225	<b>Nonpriority creditor's name and mailing address</b> <b>OSC AUTOMOTIVE INC</b> <b>330 S HALE AVE</b> <b>FULLERTON, CA 92831</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$42,421.81</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.226	<b>Nonpriority creditor's name and mailing address</b> <b>PARKS CHEVROLET</b> <b>6441 NORTH TRYON</b> <b>P.O. BOX 560826</b> <b>CHARLOTTE, NC 28256-0826</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$264.76</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.227	<b>Nonpriority creditor's name and mailing address</b> <b>PARKS CHEVROLET</b> <b>P. O. BOX 386</b> <b>KERNERSVILLE, NC 27285</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$71.05</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.228	<b>Nonpriority creditor's name and mailing address</b> <b>PARKWAY FORD</b> <b>2104 PETERS CREEK PARKWAY</b> <b>WINSTON SALEM, NC 27127</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$44.59</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.229	<b>Nonpriority creditor's name and mailing address</b> <b>PARKWAY SUBARU HYUNDAI</b> <b>5920 MARKET STREET</b> <b>WILMINGTON, NC 28405</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$159.96</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.230	<b>Nonpriority creditor's name and mailing address</b> <b>PARTLAND, LLC</b> <b>3740 PATTERSON AVENUE</b> <b>WINSTON-SALEM, NC 27105</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$143,424.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Rent</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.231	<b>Nonpriority creditor's name and mailing address</b> <b>PARTSFLEET, INC</b> <b>P.O. BOX 2513</b> <b>ORLANDO, FL 32802</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$66,500.37</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Carrier Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known) _____
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3.232	<b>Nonpriority creditor's name and mailing address</b> <b>PATRIOT SANITATION MGMT</b> <b>P.O. BOX 125</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Waste Management</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$209.00</b>
3.233	<b>Nonpriority creditor's name and mailing address</b> <b>PATRIOT SANITATION MGMT</b> <b>P.O. BOX 125</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u><b>2767</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>NOTICE ONLY</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.234	<b>Nonpriority creditor's name and mailing address</b> <b>PEACE STREET INSPECTIONS</b> <b>600 W PEACE ST</b> <b>RALEIGH, NC 27605</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Trade debt</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$350.47</b>
3.235	<b>Nonpriority creditor's name and mailing address</b> <b>PERFORMANCE RADIATOR</b> <b>PACIFIC, LLC</b> <b>P O BOX 24947</b> <b>SEATTLE, WA 98124-0947</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Trade debt</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,856.58</b>
3.236	<b>Nonpriority creditor's name and mailing address</b> <b>PIEDMONT NATURAL GAS</b> <b>P.O. BOX 660920</b> <b>DALLAS, TX 75266-0920</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Utilities</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$455.49</b>
3.237	<b>Nonpriority creditor's name and mailing address</b> <b>PIEDMONT NATURAL GAS</b> <b>BANKRUPTCY DEPARTMENT</b> <b>4720 PIEDMONT ROW</b> <b>CHARLOTTE, NC 28210</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u><b>4001</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>NOTICE ONLY</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.238	<b>Nonpriority creditor's name and mailing address</b> <b>PIEDMONT NATURAL GAS</b> <b>BANKRUPTCY DEPARTMENT</b> <b>4720 PIEDMONT ROW</b> <b>CHARLOTTE, NC 28210</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u><b>3001</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>NOTICE ONLY</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>



Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known) _____
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3.239	Nonpriority creditor's name and mailing address <b>PIEDMONT NATURAL GAS BANKRUPTCY DEPARTMENT 4720 PIEDMONT ROW CHARLOTTE, NC 28210</b>  Date(s) debt was incurred _____ Last 4 digits of account number <b>4002</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.240	Nonpriority creditor's name and mailing address <b>PIEDMONT NATURAL GAS BANKRUPTCY DEPARTMENT 4720 PIEDMONT ROW CHARLOTTE, NC 28210</b>  Date(s) debt was incurred _____ Last 4 digits of account number <b>1001</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.241	Nonpriority creditor's name and mailing address <b>PIEDMONT NATURAL GAS BANKRUPTCY DEPARTMENT 4720 PIEDMONT ROW CHARLOTTE, NC 28210</b>  Date(s) debt was incurred _____ Last 4 digits of account number <b>4009</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.242	Nonpriority creditor's name and mailing address <b>PIEDMONT NATURAL GAS BANKRUPTCY DEPARTMENT 4720 PIEDMONT ROW CHARLOTTE, NC 28210</b>  Date(s) debt was incurred _____ Last 4 digits of account number <b>8001</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.243	Nonpriority creditor's name and mailing address <b>PIEDMONT NATURAL GAS BANKRUPTCY DEPARTMENT 4720 PIEDMONT ROW CHARLOTTE, NC 28210</b>  Date(s) debt was incurred _____ Last 4 digits of account number <b>4002</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.244	Nonpriority creditor's name and mailing address <b>PIEDMONT NATURAL GAS BANKRUPTCY DEPARTMENT 4720 PIEDMONT ROW CHARLOTTE, NC 28210</b>  Date(s) debt was incurred _____ Last 4 digits of account number <b>3004</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.245	Nonpriority creditor's name and mailing address <b>PIEDMONT NATURAL GAS BANKRUPTCY DEPARTMENT 4720 PIEDMONT ROW CHARLOTTE, NC 28210</b>  Date(s) debt was incurred _____ Last 4 digits of account number <b>4006</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known) _____
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3.246	<b>Nonpriority creditor's name and mailing address</b> <b>PIEDMONT NATURAL GAS</b> <b>BANKRUPTCY DEPARTMENT</b> <b>4720 PIEDMONT ROW</b> <b>CHARLOTTE, NC 28210</b>  Date(s) debt was incurred _____ Last 4 digits of account number <b>4007</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>NOTICE ONLY</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.247	<b>Nonpriority creditor's name and mailing address</b> <b>PINKERTON CHEVROLET INC</b> <b>LYNCHBURG, INC.</b> <b>801 GRAVES MILL ROAD</b> <b>LYNCHBURG, VA 24502</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$417.41</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Trade debt</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.248	<b>Nonpriority creditor's name and mailing address</b> <b>PLEWS INC</b> <b>PO BOX 772948</b> <b>CHICAGO, IL 60677-0248</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,765.03</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Trade debt</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.249	<b>Nonpriority creditor's name and mailing address</b> <b>PORTER'S AUTOMOTIVE , INC</b> <b>2715 WILLIAMSON ROAD</b> <b>ROANOKE, VA 24012</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$93.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Trade debt</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.250	<b>Nonpriority creditor's name and mailing address</b> <b>POTEAAT'S AUTO PARTS -11</b> <b>1906 N MAIN ST</b> <b>KANNAPOLIS, NC 28081</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$957.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Trade debt</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.251	<b>Nonpriority creditor's name and mailing address</b> <b>POWER STOP LLC</b> <b>6112C W. 73RD STREET</b> <b>BEDFORD PARK, IL 60638</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$346,602.89</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Trade debt</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.252	<b>Nonpriority creditor's name and mailing address</b> <b>POWERMAX USA</b> <b>11750 JERSEY BLVD</b> <b>RANCHO CUCAMONGA, CA 91730</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$2,844.96</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Trade debt</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.253	<b>Nonpriority creditor's name and mailing address</b> <b>PREMIUM GUARD INC</b> <b>P.O. BOX 105328</b> <b>ATLANTA, GA 30348-5328</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$119,759.77</b>
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3.254	<b>Nonpriority creditor's name and mailing address</b> <b>PRIME AUTOMOTIVE WAREHOUSE</b> <b>P.O. BOX 741554</b> <b>ATLANTA, GA 30374-1154</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$92,973.83</b>
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3.255	<b>Nonpriority creditor's name and mailing address</b> <b>PROTECTION 1 ALARM</b> <b>MONITORING INC</b> <b>P.O. BOX 219044</b> <b>KANSAS CITY, MO 64121-9044</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$333.66</b>
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3.256	<b>Nonpriority creditor's name and mailing address</b> <b>PSNC ENERGY</b> <b>P.O. BOX 100256</b> <b>COLUMBIA, SC 29202</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>8541</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.257	<b>Nonpriority creditor's name and mailing address</b> <b>PSNC ENERGY</b> <b>P.O. BOX 100256</b> <b>COLUMBIA, SC 29202</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>2525</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.258	<b>Nonpriority creditor's name and mailing address</b> <b>PUBLIC SERVICE COMPANY OF</b> <b>PAYMENT CENTER</b> <b>P. O. BOX 100256</b> <b>COLUMBIA, SC 29202-3256</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$561.40</b>
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3.259	<b>Nonpriority creditor's name and mailing address</b> <b>R &amp; B, INC.</b> <b>P. O. BOX 8500 (S-4565)</b> <b>PHILADELPHIA, PA 19178-4565</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$124,810.08</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.260	<b>Nonpriority creditor's name and mailing address</b> <b>R DANIEL LUPER</b> <b>2401 WINDMERE DRIVE</b> <b>WINSTON SALEM, NC 27103</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$218,762.94</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Promissory Note</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.261	<b>Nonpriority creditor's name and mailing address</b> <b>R DANIEL LUPER</b> <b>2401 WINDMERE DRIVE</b> <b>WINSTON SALEM, NC 27103</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$24,406.21</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Stock Redemption</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.262	<b>Nonpriority creditor's name and mailing address</b> <b>REMY INC</b> <b>P.O. BOX 930197</b> <b>ATLANTA, GA 31193-0197</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$32,854.50</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.263	<b>Nonpriority creditor's name and mailing address</b> <b>REPUBLIC SERVICES-01</b> <b>PO BOX 9001099</b> <b>LOUISVILLE, KY 40290-1099</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$2,046.91</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.264	<b>Nonpriority creditor's name and mailing address</b> <b>RIVERS, DAVID</b> <b>402 ELAINE PLACE</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$205.55</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.265	<b>Nonpriority creditor's name and mailing address</b> <b>ROANOKE GAS COMPANY</b> <b>P.O. BOX 70848</b> <b>CHARLOTTE, NC 28272-0848</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$205.11</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.266	<b>Nonpriority creditor's name and mailing address</b> <b>RODERICK CORDER</b> <b>3837 MAMIE MAY RD</b> <b>FRANKLINVILLE, NC 27248</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$518.02</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.267	<b>Nonpriority creditor's name and mailing address</b> <b>S.M. ARNOLD, INC</b> <b>7901 MICHIGAN AVE</b> <b>SAINT LOUIS, MO 63111-4103</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$27.72</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.268	<b>Nonpriority creditor's name and mailing address</b> <b>SIMON'S AUTO SALES</b> <b>13430 US HWY 70 EAST</b> <b>CLAYTON, NC 27520</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$242.87</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.269	<b>Nonpriority creditor's name and mailing address</b> <b>SOUTHERN TIRE SALES</b> <b>615 CHAPEL HILL ROAD</b> <b>BURLINGTON, NC 27215</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,631.01</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.270	<b>Nonpriority creditor's name and mailing address</b> <b>SPECTRUM BUSINESS</b> <b>ATTN: RECOVERY DEPARTMENT</b> <b>3347 PLATT SPRINGS ROAD</b> <b>WEST COLUMBIA, SC 29170</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>3201</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.271	<b>Nonpriority creditor's name and mailing address</b> <b>SPECTRUM BUSINESS</b> <b>ATTN: RECOVERY DEPARTMENT</b> <b>3347 PLATT SPRINGS ROAD</b> <b>WEST COLUMBIA, SC 29170</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>0301</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.272	<b>Nonpriority creditor's name and mailing address</b> <b>SPECTRUM BUSINESS</b> <b>ATTN: RECOVERY DEPARTMENT</b> <b>3347 PLATT SPRINGS ROAD</b> <b>WEST COLUMBIA, SC 29170</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>1001</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.273	<b>Nonpriority creditor's name and mailing address</b> <b>STANDARD MOTOR PRODUCTS</b> <b>93307 NETWORK PLACE</b> <b>CHICAGO, IL 60673-1933</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$70,397.74</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.274	<b>Nonpriority creditor's name and mailing address</b> <b>STATE OF NC - EPROC</b> <b>P.O. BOX 752167</b> <b>CHARLOTTE, NC 28275-2167</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1.86</b>
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3.275	<b>Nonpriority creditor's name and mailing address</b> <b>SUNLAND FIRE PROTECTION</b> <b>P.O. BOX 277</b> <b>JAMESTOWN, NC 27282</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$710.00</b>
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3.276	<b>Nonpriority creditor's name and mailing address</b> <b>SUPER CLEAN SERVICES</b> <b>2926 DURANT DRIVE</b> <b>WINSTON SALEM, NC 27107</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$540.00</b>
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3.277	<b>Nonpriority creditor's name and mailing address</b> <b>T K S ELECTRICAL CONTRACT</b> <b>P.O. BOX 863</b> <b>RURAL HALL, NC 27045</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,959.52</b>
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3.278	<b>Nonpriority creditor's name and mailing address</b> <b>TAG AUTO SERVICE</b> <b>11048 CLEVELAND RD</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$424.51</b>
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3.279	<b>Nonpriority creditor's name and mailing address</b> <b>TALK OF THE TOWN COUPONS</b> <b>1937 FLEMING ROAD</b> <b>GREENSBORO, NC 27410</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Advertising</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$383.33</b>
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3.280	<b>Nonpriority creditor's name and mailing address</b> <b>TAYLOR MOTOR COMPANY</b> <b>P.O. BOX 267</b> <b>WAYNESVILLE, NC 28786</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17.47</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.281	<b>Nonpriority creditor's name and mailing address</b> <b>TECHNICAL CHEMICAL COMP.</b> <b>3327 PIPELINE ROAD</b> <b>CLEBUME, TX 76033-0139</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,923.25</b>
<hr/>			
3.282	<b>Nonpriority creditor's name and mailing address</b> <b>TENNECO AUTOMOTIVE OPERAT</b> <b>C/O TENNECO AUTOMOTIVE RS</b> <b>3864 SOLUTIONS CENTER</b> <b>CHICAGO, IL 60677-3008</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$23,400.33</b>
<hr/>			
3.283	<b>Nonpriority creditor's name and mailing address</b> <b>TERMINIX COMPANY</b> <b>CENTRAL ACCOUNTING OFFICE</b> <b>P. O. BOX 14009</b> <b>GREENSBORO, NC 27415-4009</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Pest Control</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$52.00</b>
<hr/>			
3.284	<b>Nonpriority creditor's name and mailing address</b> <b>TERRY LABONTE CHEVROLET</b> <b>P.O. BOX 77758</b> <b>GREENSBORO, NC 27417-7758</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,468.48</b>
<hr/>			
3.285	<b>Nonpriority creditor's name and mailing address</b> <b>THE CITY OF MOUNT AIRY UTILITIES</b> <b>300 S. MAIN STREET</b> <b>MOUNT AIRY, NC 27030</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>2370</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
3.286	<b>Nonpriority creditor's name and mailing address</b> <b>THE TIMKEN CORPORATION</b> <b>28838 NETWORK PLACE</b> <b>CHICAGO, IL 60673-1288</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$160,743.45</b>
<hr/>			
3.287	<b>Nonpriority creditor's name and mailing address</b> <b>THOMSON FINANCIAL</b> <b>P.O. BOX 415983</b> <b>BOSTON, MA 02241-5983</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$190.00</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.288	<b>Nonpriority creditor's name and mailing address</b> <b>TIME WARNER CABLE</b> <b>BOX 223085</b> <b>PITTSBURGH, PA 15251-2085</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$241.71</b>
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3.289	<b>Nonpriority creditor's name and mailing address</b> <b>TOWN OF KERNERSVILLE UTILITIES</b> <b>P.O. BOX 728</b> <b>KERNERSVILLE, NC 27285-0728</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>2380</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.290	<b>Nonpriority creditor's name and mailing address</b> <b>TRANSCEDAR LTD/MOTORAD</b> <b>DEPT# 30796</b> <b>P O BOX 790126</b> <b>ST LOUIS, MO 63179</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,832.13</b>
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3.291	<b>Nonpriority creditor's name and mailing address</b> <b>TRANSTAR INDUSTRIES INC</b> <b>501 COUNTRY ROAD 30</b> <b>FLORENCE, AL 35634</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$251.90</b>
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3.292	<b>Nonpriority creditor's name and mailing address</b> <b>TURN KEY TIRE</b> <b>1340 BOBBITT DRIVE</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$495.81</b>
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3.293	<b>Nonpriority creditor's name and mailing address</b> <b>TUWELLA, LLC</b> <b>PO BOX 4859</b> <b>WINSTON SALEM, NC 27115</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Rent</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$262,510.64</b>
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3.294	<b>Nonpriority creditor's name and mailing address</b> <b>UCI GOLDSBORO (18)</b> <b>P O BOX 780</b> <b>GOLDSBORO, NC 27533</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,072.00</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.295	<b>Nonpriority creditor's name and mailing address</b> <b>UNIFIRST CORPORATION</b> <b>526 PINEY GROVE ROAD</b> <b>KERNERSVILLE, NC 27284</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$77.22</b>
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3.296	<b>Nonpriority creditor's name and mailing address</b> <b>UNITED PAPER COMPANY</b> <b>DIV OF HUFF PAPER CO</b> <b>P.O. BOX 7696</b> <b>RICHMOND, VA 23231</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,557.95</b>
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3.297	<b>Nonpriority creditor's name and mailing address</b> <b>UNITED PARCEL SERVICE</b> <b>P. O. BOX 7247-0244</b> <b>PHILADELPHIA, PA 19170-0001</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Carrier services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$860.24</b>
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3.298	<b>Nonpriority creditor's name and mailing address</b> <b>UQUALITY AUTOMOTIVE PROD.</b> <b>DEPT LA 22888</b> <b>PASADENA, CA 91185</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$118,303.13</b>
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3.299	<b>Nonpriority creditor's name and mailing address</b> <b>US 70 INSPECTIONS</b> <b>716 US HWY 70 BUS WEST</b> <b>GARNER, NC 27529</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$703.09</b>
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3.300	<b>Nonpriority creditor's name and mailing address</b> <b>VALSPAR LOCKBOX 741667</b> <b>P,O BOX 741667</b> <b>ATLANTA, GA 30374-1667</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,115.06</b>
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3.301	<b>Nonpriority creditor's name and mailing address</b> <b>VALVOLINE LLC</b> <b>P. O. BOX 117131</b> <b>ATLANTA, GA 30368-7131</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$72,471.99</b>
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Debtor	<b>Auto Supply Company, Inc.</b> Name _____	Case number (if known) _____
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3.302	<b>Nonpriority creditor's name and mailing address</b> <b>VANN YORK CHEVROLET INC</b> <b>321 EASTCHESTER DRIVE</b> <b>HIGH POINT, NC 27262</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$86.76</b>
<hr/>			
3.303	<b>Nonpriority creditor's name and mailing address</b> <b>VERIZON</b> <b>P O BOX 4830</b> <b>TRENTON, NJ 08650-4830</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Cell Phone Service</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$200.20</b>
<hr/>			
3.304	<b>Nonpriority creditor's name and mailing address</b> <b>VESTAL PONTIAC, BUICK GMC</b> <b>900 HIGHWAY 66 SOUTH</b> <b>KERNERSVILLE, NC 27284</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$581.48</b>
<hr/>			
3.305	<b>Nonpriority creditor's name and mailing address</b> <b>VISTA-PRO AUTOMOTIVE, LLC</b> <b>75 REMITTANCE DRIVE</b> <b>SUITE 6007</b> <b>CHICAGO, IL 60675-6007</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$336.15</b>
<hr/>			
3.306	<b>Nonpriority creditor's name and mailing address</b> <b>WALKER AUTOMOTIVE STORES</b> <b>P O BOX 19348</b> <b>RALEIGH, NC 27619</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$376.06</b>
<hr/>			
3.307	<b>Nonpriority creditor's name and mailing address</b> <b>WASTE INDUSTRIES, INC.</b> <b>3301 BENSON DRIVE</b> <b>SUITE 601</b> <b>RALEIGH, NC 27609</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>3968</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
3.308	<b>Nonpriority creditor's name and mailing address</b> <b>WASTE INDUSTRIES, INC.</b> <b>3301 BENSON DRIVE</b> <b>SUITE 601</b> <b>RALEIGH, NC 27609</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>0344</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Auto Supply Company, Inc.</b> Name	Case number (if known)
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3.309	<b>Nonpriority creditor's name and mailing address</b> <b>WASTE INDUSTRIES, INC.</b> <b>3301 BENSON DRIVE</b> <b>RALEIGH, NC 27609</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>0345</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.310	<b>Nonpriority creditor's name and mailing address</b> <b>WASTE MANAGMENT</b> <b>1001 FANNIN, SUITE 4000</b> <b>HOUSTON, TX 77002</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>2001</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.311	<b>Nonpriority creditor's name and mailing address</b> <b>WESTAR DISTRIBUTION, LLC</b> <b>8700 ROBERT FULTON DR</b> <b>SUITE B</b> <b>COLUMBIA, MD 21046</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,384.29</b>
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3.312	<b>Nonpriority creditor's name and mailing address</b> <b>WESTERN VIRGINIA WATER AU</b> <b>P O BOX 17381</b> <b>BALTIMORE, MD 21297-1381</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$358.15</b>
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3.313	<b>Nonpriority creditor's name and mailing address</b> <b>WHITEHEART AND SONS CO</b> <b>3500 N PATTERSON AVE</b> <b>WINSTON SALEM, NC 27105</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$614.99</b>
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3.314	<b>Nonpriority creditor's name and mailing address</b> <b>WINDSTREAM</b> <b>P.O. BOX 9001013</b> <b>LOUISVILLE, KY 40290-1013</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,910.73</b>
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3.315	<b>Nonpriority creditor's name and mailing address</b> <b>WOOD'S FLEET &amp; TRUCK CENT</b> <b>418 WASHINGTON AVE</b> <b>VINTON, VA 24179</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Trade debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$864.16</b>
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Debtor **Auto Supply Company, Inc.**  
Name

Case number (if known)

3.316 Nonpriority creditor's name and mailing address

**WOTCO INCORPORATED**  
**P.O. BOX 30502**  
**CHARLOTTE, NC 28230**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Basis for the claim: **Trade debt**Is the claim subject to offset? ☒ No ☐ Yes**\$1,398.00**

3.317 Nonpriority creditor's name and mailing address

**WRAP-IT**  
**9040 HIGHVIEW LANE**  
**WOODBURY, MN 55125**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Basis for the claim: **Trade debt**Is the claim subject to offset? ☒ No ☐ Yes**\$94.14**

3.318 Nonpriority creditor's name and mailing address

**WURTH USA INC.**  
**P O BOX 415889**  
**BOSTON, MA 02241-5889**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Basis for the claim: **Trade debt**Is the claim subject to offset? ☒ No ☐ Yes**\$293.13**

3.319 Nonpriority creditor's name and mailing address

**ZF SERVICES, LLC**  
**P O BOX 5820**  
**CAROL STREAM, IL 60197-5820**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Basis for the claim: **Trade debt**Is the claim subject to offset? ☒ No ☐ Yes**\$35,791.80****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the  
related creditor (if any) listed?Last 4 digits of  
account number, if  
any**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

**Total of claim amounts**5a. \$ **215,424.92**5b. + \$ **5,055,630.19**5c. \$ **5,271,055.11**

**Fill in this information to identify the case:**Debtor name **Auto Supply Company, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

**Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**ADAMS, DENNIS  
5790 LITTLE OAK COURT  
GRANITE FALLS, NC 28630**2.2. State what the contract or lease is for and the nature of the debtor's interest **PAYROLL SERVICES**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**ADP  
ONE ROSELAND BOULEVARD  
ROSELAND, NJ 07068**2.3. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**ANDREW, KENNETH  
240 WELLS AVENUE  
WASHINGTON, NC 27889**2.4. State what the contract or lease is for and the nature of the debtor's interest **INSURANCE**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**BCBS  
P.O. BOX 580017  
CHARLOTTE, NC 28258-0017**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.5. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**BELL, BENJAMIN**  
**905 WESTSIDE DR.**  
**KERNERSVILLE, NC 27284**

- 2.6. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

State the term remaining

List the contract number of any government contract

**MONTH TO MONTH**

**BINGHAM GROUP COMMERCIAL**  
**ATTN: KEN BINGHAM**  
**600 HWT 801 S.**  
**ADVANCE, NC 27006**

- 2.7. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

State the term remaining

List the contract number of any government contract

**22 MONTHS**

**BOYD HASSELL IND & COM PRO**  
**200 FIRST AVE NW**  
**SUITE 507**  
**Hickory, NC 28601-4000**

- 2.8. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**BROWN, RICHARD L**  
**171 COUNTRY CIRCLE**  
**ADVANCE, NC 27006**

- 2.9. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**BYERLY, JENNIFER B**  
**3966 HILLCREST CT**  
**SOPHIA, NC 27350**

- 2.10. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

State the term remaining

List the contract number of any government contract

**37 MONTHS**

**CAUDLE COMMERCIAL ELECTRIC**  
**208 E. BODENHAMER ST.**  
**KERNERSVILLE, NC 27284**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

- 2.11. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**CHAPPELL, EDWARD G**  
**1503 MIRIAM AVENUE**  
**GARNER, NC 27529**

- 2.12. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**CHILDERS, JEROMY S**  
**212 CATES AVE**  
**BURLINGTON, NC 27215**

- 2.13. State what the contract or lease is for and the nature of the debtor's interest **OFF SITE SERVER HOST**

State the term remaining

List the contract number of any government contract

**8 MONTHS**

**DATA CHAMBERS**  
**3310 OLD LEXINGTON RD**  
**WINSTON-SALEM, NC 27107**

- 2.14. State what the contract or lease is for and the nature of the debtor's interest **COMPUTER EQUIPMENT LEASE**

State the term remaining

List the contract number of any government contract

**DELL**  
**DBC DELL BS CREDIT REV ACCTR**  
**1 DELL WAY**  
**ROUND ROCK, TX 78864**

- 2.15. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**EATON, STEVE M**  
**138 EATON ROAD**  
**MT. AIRY, NC 27030**

- 2.16. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

**ELECTROSWITCH, INC.**  
**2010 YONKERS ROAD**  
**RALEIGH, NC 27604**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining **MONTH TO MONTH**

List the contract number of any government contract \_\_\_\_\_

2.17. State what the contract or lease is for and the nature of the debtor's interest **MASTER LEASE AGREEMENT (97 VEHICLES)**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**ENTERPRISE FLEET SERVICES  
5715 WESTPARK DR.  
Charlotte, NC 28217**2.18. State what the contract or lease is for and the nature of the debtor's interest **COMPUTER SYSTEM SUPPORT**State the term remaining **MONTH TO MONTH**

List the contract number of any government contract \_\_\_\_\_

**EPICORE  
804 LAS CIMAS PKWY  
SUITE 303  
Austin, TX 78746**2.19. State what the contract or lease is for and the nature of the debtor's interest **INSURANCE**State the term remaining **1 MONTH**

List the contract number of any government contract \_\_\_\_\_

**EVANSTON INSURANCE COMPANY  
C.O I.G.O. INSURANCE AGENCY, INC.  
RALEIGH, NC 27612**2.20. State what the contract or lease is for and the nature of the debtor's interest **FLEET CARRIER**State the term remaining **MONTH TO MONTH**

List the contract number of any government contract \_\_\_\_\_

**FLEETGISTICS  
PARTSFLEET, INC.  
2251 LYNX LANE  
SUITE 5  
ORLANDO, FL 32804**2.21. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**FORREST JR, OLLIE  
100 EMORY DRIVE  
GREENSBORO, NC 27406**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.22. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**FOX, DAVID**  
**1930 20TH AVE DR NE**  
**APT 31**  
**HICKORY, NC 28601**

- 2.23. State what the contract or lease is for and the nature of the debtor's interest **FREIGHT CARRIER**

State the term remaining

List the contract number of any government contract

**MONTH TO MONTH**

**GEM LOGISTICS**  
**7800 FALLS OF NEUSE ROAD**  
**RALEIGH, NC 27624**

- 2.24. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**GRIMES, TAMMY**  
**3909 NORTH MAIN STREET**  
**HIGH POINT, NC 27265**

- 2.25. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**HANSEN, BRAD C**  
**310 EAST D STREET**  
**ERWIN, NC 28339**

- 2.26. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**HEDRICK, EDWARD D**  
**102 HINKLE ST**  
**THOMASVILLE, NC 27360**

- 2.27. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**HOOD, MARK P**  
**2533 SANDERS ROAD**  
**WILLOW SPRING, NC 27592**



Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

- 2.28. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**HUTCHENS, JONATHAN B**  
**305 D SAVANNAH PLACE**  
**KING, NC 27021**

- 2.29. State what the contract or lease is for and the nature of the debtor's interest **INSURANCE AGENCY**

State the term remaining

List the contract number of any government contract

**I.G.O INSURANCE AGENCY, INC.**  
**8117 EBENEZER CHURCH DRIVE**  
**RALEIGH, NC 27612**

- 2.30. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**INMAN, MICHAEL T**  
**110 SAPPHIRE LANE**  
**PILOT MTN, NC 27041**

- 2.31. State what the contract or lease is for and the nature of the debtor's interest **TELECOMMUNICATIONS**

State the term remaining

List the contract number of any government contract

**MONTH TO MONTH**

**INTERMEDIA**  
**DEPARTMENT LA 24328**  
**PASADENA, CA 91185**

- 2.32. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**JONES, EDWIN**  
**110 STEEPLE HEIGHTS LANE**  
**MORGANTON, NC 28655**

- 2.33. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

**JOYCE, RANDY**  
**161 GUINNESS LANE**  
**MT. AIRY, NC 27030**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract

2.34. State what the contract or lease is for and the nature of the debtor's interest **LEASE**State the term remaining **11 MONTHS**

List the contract number of any government contract

**JOYCE, ROY AND OLGA  
221 CREEK DRIVE  
MOUNT AIRY, NC 27030**2.35. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**KAPP, KARL  
286 ST. JAMES DR  
WINSTON-SALEM, NC 27107**2.36. State what the contract or lease is for and the nature of the debtor's interest **SERVICE CONTRACT**

State the term remaining

List the contract number of any government contract

**KEMP TECHNOLOGIES  
1540 BROADWAY  
FL 23  
NEW YORK, NY 10036**2.37. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**KEY JR, CHARLES  
197 HAYWOOD DRIVE  
ADVANCE, NC 27006**2.38. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**KEY, C. ANDREW  
322 HANOVER ARMS CT  
WINSTON-SALEM, NC 27104**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.39. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**KRESS, MICHAEL**  
**1411 N SHORE DRIVE**  
**SOUTHPORT, NC 28461**

- 2.40. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**MCCLAMROCH, JOHN**  
**169 N SUNSET RIDGE DR**  
**WILLOW SPRING, NC 27592**

- 2.41. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**MCNEIL, KENNETH C**  
**1903 AUTUMN**  
**GREENSBORO, NC 27405**

- 2.42. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

State the term remaining

List the contract number of any government contract

**MDH PROPCO 2015-B LLC**  
**3715 NORTHSIDE PARKWAY NW**  
**NORTHWEST BUILDING 400**  
**SUITE 240**  
**ATLANTA, GA 30327**

- 2.43. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**MILLER, KEITH**  
**205 BLUEGRASS DR**  
**WARRENTON, NC 27589**

- 2.44. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**MITCHELL JR, ROY H**  
**121 OLD MURPHY ROAD**  
**ZEBULON, NC 27597**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.45. State what the contract or lease is for and the nature of the debtor's interest **IT SUPPORT**State the term remaining **10 MONTHS**

List the contract number of any government contract

**NITOR  
3630 CLEMMONS RD.  
SUITE 303  
CLEMMONS, NC 27012**2.46. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**PARKER II, HAROLD  
226 GREENTREE ROAD  
THOMASVILLE, NC 27360**2.47. State what the contract or lease is for and the nature of the debtor's interest **LEASE**State the term remaining **MONTH TO MONTH**

List the contract number of any government contract

**PARTLAND, LLC  
P.O. BOX 4859  
WINSTON-SALEM, NC 27115-4859**2.48. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**REDDICK, KEVIN  
7075 TURNPIKE RD  
ARCHDALE, NC 27263**2.49. State what the contract or lease is for and the nature of the debtor's interest **INSURANCE**State the term remaining **1 MONTH**

List the contract number of any government contract

**REPUBLIC INSURANCE AGENCY, INC.  
C/O I.G.O. INSURANCE AGENCY, INC.  
8117 EBENEZER CHURCH DRIVE  
RALEIGH, NC**2.50. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT****RILEY, HEATHER  
2703 RAINS DRIVE  
HAW RIVER, NC 27258**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract

- 2.51. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**SCHAEFER II, JOHN**  
**279 DEER TRACK DR**  
**BURGAW, NC 28425**

- 2.52. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**SCHLEY, DANIEL**  
**2005 SANDY PORTER RD**  
**#203**  
**CHARLOTTE, NC 28273**

- 2.53. State what the contract or lease is for and the nature of the debtor's interest **SERVICE CONTRACT**

State the term remaining

List the contract number of any government contract

**SERVICE EXPRESS, INC.**  
**3854 BROADMOOR AVE, SE**  
**Grand Rapids, MI 49512**

- 2.54. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

State the term remaining **25 MONTHS**

List the contract number of any government contract

**SMITH PROPERTIES OF WILMINGTON**  
**800 SHIPYARD BLVD.**  
**WILMINGTON, NC 28412**

- 2.55. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

State the term remaining **36 MONTHS**

List the contract number of any government contract

**SON, SHU PING and WANG, YONG**  
**C/O UNIVERSAL REALTY, LLC**  
**P.O. BOX 3883**  
**ATTN: ANGNES LAM**  
**CARY, NC 27519**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.56. State what the contract or lease is for and the nature of the debtor's interest **SERVICE CONTRACT**

State the term remaining **MONTH TO MONTH**

List the contract number of any government contract \_\_\_\_\_

**SPECTRIO  
720 BROOKER CREEK BLVD.  
STE 215  
OLDSMAR, FL 34677**

2.57. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

State the term remaining **25 MONTHS**

List the contract number of any government contract \_\_\_\_\_

**STRICKLAND, JEWEL  
2604 COULTER PLACE  
WILMINGTON, NC 28409**

2.58. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**SUITS, TIMOTHY  
6527 CEDARBERRY ROAD  
TRINITY, NC 27370**

2.59. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

State the term remaining **20 MONTHS**

List the contract number of any government contract \_\_\_\_\_

**TARLTON, BRIAN T. and TARLTON, CATHY S.  
1058 EVANGELINE DRIVE  
LELAND, NC 28451-7992**

2.60. State what the contract or lease is for and the nature of the debtor's interest **LEASE**

State the term remaining **56 MONTHS**

List the contract number of any government contract \_\_\_\_\_

**THREE OAKS PARTNERS LLC  
1131-B MILITARY CUTOFF ROAD  
WILMINGTON, NC 28405**

2.61. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining \_\_\_\_\_

List the contract number of any \_\_\_\_\_

**TOPPS, DONALD A  
99 MAPLEWOOD DRIVE  
KNIGHTDALE, NC 27545**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.62. State what the contract or lease is for and the nature of the debtor's interest **INSURANCE**

State the term remaining

List the contract number of any government contract

**TRAVELERS INSURANCE  
C/O I.G.O. INSURANCE AGENCY, INCL  
8117 EBENEZER CHURCH DRIVE  
RALEIGH, NC 27612**2.63. State what the contract or lease is for and the nature of the debtor's interest **LEASE**State the term remaining **7 MONTHS**

List the contract number of any government contract

**TUWELLA, LLC  
P.O. BOX 4859  
WINSTON, NC 27115-4859**2.64. State what the contract or lease is for and the nature of the debtor's interest **LEASE**State the term remaining **45 MONTHS**

List the contract number of any government contract

**TUWELLA, LLC  
P.O. BOX 4859  
WINSTON, NC 27115-4859**2.65. State what the contract or lease is for and the nature of the debtor's interest **Telecommunications**State the term remaining **30 MONTHS**

List the contract number of any government contract

**TWC/SPECTRUM  
1900 BLUECREST LANE  
SAN ANTONIO, TX 78247**2.66. State what the contract or lease is for and the nature of the debtor's interest **INSURANCE**State the term remaining **1 MONTH**

List the contract number of any government contract

**UTICA INSURANCE COMPANY  
C/O I.G.O. INSURANCE AGENCY, INC.  
8117 EBENEZER CHURCH DRIVE  
RALEIGH, NC 27612**2.67. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT****VANEMAN, ERNEST P  
104 LEEWAY COURT  
CLAYTON, NC 27520**

Debtor 1 **Auto Supply Company, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract

2.68. State what the contract or lease is for and the nature of the debtor's interest **Telecommunications**

State the term remaining

**MONTH TO MONTH**

List the contract number of any government contract

**VERIZON  
P.O. BOX 4001  
ACWORTH, GA 30101**

2.69. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**WALLACE, MICHAEL B  
245 WOODGREEN DR  
ABERDEEN, NC 28315**

2.70. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**WARD, RICKY  
140 MAYNARD DRIVE  
WINSTON-SALEM, NC 27107**

2.71. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**WHITE, WILLIAM P  
2920 WHEAT MEADOW LANE  
CHARLOTTE, NC 28270**

2.72. State what the contract or lease is for and the nature of the debtor's interest **EMPLOYMENT CONTRACT**

State the term remaining

List the contract number of any government contract

**WOMACK, DAVID  
117 WINDOVER LANE  
WINSTON-SALEM, NC 27107**



**Fill in this information to identify the case:**Debtor name **Auto Supply Company, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*2.1 **KEY JR,  
CHARLES and  
KEY, KAREN****197 HAYWOOD DRIVE  
ADVANCE, NC 27006****WELLS FARGO  
BANK, NA**☒ D **2.4**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_2.2 **PARTLAND, LLC****P.O. BOX 4859  
Winston Salem, NC 27115-4859****WELLS FARGO  
BANK, NA**☒ D **2.4**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

**Fill in this information to identify the case:**Debtor name Auto Supply Company, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****Sources of revenue**  
Check all that apply**Gross revenue**  
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**From **1/01/2018** to **Filing Date**☒ Operating a business**\$560,000.00**☐ Other \_\_\_\_\_**For prior year:**From **1/01/2017** to **12/31/2017**☒ Operating a business**\$37,043,415.00**☐ Other \_\_\_\_\_**For year before that:**From **1/01/2016** to **12/31/2016**☒ Operating a business**\$55,502,147.00**☐ Other \_\_\_\_\_**For the fiscal year:**From **1/01/2015** to **12/31/2015**☒ Operating a business**\$59,323,406.00**☐ Other \_\_\_\_\_**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**  
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

Debtor **Auto Supply Company, Inc.**

Case number (if known) \_\_\_\_\_

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. (See Attached List)		\$5,684,207.38	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. KEY JR, CHARLES 197 HAYWOOD DRIVE ADVANCE, NC 27006		\$8,071.70	
4.2. KEY JR, CHARLES 197 HAYWOOD DRIVE ADVANCE, NC 27006		\$19,246.16	Health Insurance Premiums
4.3. KEY JR, CHARLES 197 HAYWOOD DRIVE ADVANCE, NC 27006		\$159,749.15	Earnings/Salary
4.4. KEY JR, CHARLES 197 HAYWOOD DRIVE ADVANCE, NC 27006		\$400.00	Expense Reimbursement
4.5. KAPP, KARL 286 ST. JAMES DR WINSTON-SALEM, NC 27107		\$159,384.89	Earnings/Salary
4.6. KAPP, KARL 286 ST. JAMES DR WINSTON-SALEM, NC 27107		\$12,402.36	Health Insurance

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

Debtor **Auto Supply Company, Inc.**

Case number (if known) \_\_\_\_\_

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☐ None

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	<b>GASTONIA POLICE FOUNDATION</b>	<b>CASH</b>	<b>3/23/2017</b>	<b>\$1,125.00</b>
	Recipients relationship to debtor <b>None</b>			
9.2.	<b>AMERICAN DIABETES ASSOCIATION</b>	<b>CASH</b>	<b>9/8/2017</b>	<b>\$1,398.00</b>
	Recipients relationship to debtor <b>None</b>			

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss  If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Dates of loss	Value of property lost
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**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

Debtor **Auto Supply Company, Inc.**

Case number (if known)

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	BLANCO TACKABERY 110 S. STRATFORD RD. SUITE 500 WINSTON-SALEM, NC 27104-4299		1/5/2018	\$104,197.50

Email or website address

Who made the payment, if not debtor?

11.2.	THE FINLEY GROUP 212 S. TRYON ST. SUITE 1050 CHARLOTTE, NC 28281		1/5/2018	\$107,809.87
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Email or website address

Who made the payment, if not debtor?

## 12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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## 13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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## Part 7: Previous Locations

### 14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
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## Part 8: Health Care Bankruptcies

Debtor **Auto Supply Company, Inc.**

Case number (if known) \_\_\_\_\_

**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☒ Yes. State the nature of the information collected and retained.

**CUSTOMER CREDIT CARD AND PERSONAL INFORMATION**

Does the debtor have a privacy policy about that information?

- ☐ No
- ☒ Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☐ No. Go to Part 10.
- ☒ Yes. Does the debtor serve as plan administrator?

☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

**AUTO SUPPLY COMPANY 401K PLAN**

Employer identification number of the plan

EIN: **56-1542433**

Has the plan been terminated?

- ☒ No
- ☐ Yes

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

Debtor **Auto Supply Company, Inc.**

Case number (if known) \_\_\_\_\_

☐ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**☐ No.☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**☐ No.☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**24. Has the debtor notified any governmental unit of any release of hazardous material?**☐ No.☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business**

Debtor **Auto Supply Company, Inc.**

Case number (if known) \_\_\_\_\_

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

**Business name address****Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

**Dates business existed****26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

**Name and address****Date of service  
From-To**

26a.1. **KAPP, KARL  
286 ST. JAMES DR  
WINSTON-SALEM, NC 27107**

**7/17/06 to present**

26a.2. **HARRIS, DENISE L  
107 JOSIE LANE  
KING, NC 27021**

**9/4/12 to present**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

**Name and address****Date of service  
From-To**

26b.1. **DIXON HUGHES GOODMAN, LLP  
100 N. MAIN ST.  
SUITE 2300  
WINSTON-SALEM, NC 27101**

**2002 to present**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

**Name and address****If any books of account and records are  
unavailable, explain why**

26c.1. **HARRIS, DENISE L  
107 JOSIE LANE  
KING, NC 27021**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

**Name and address**

26d.1. **AC DELCO/GM  
6200 GRAND POINT DR.  
MAIL CODE 485-303-713  
GRAND BLANC, MI 48439**

26d.2. **FORD MOTOR COMPANY  
Ford Customer Service Division  
Credit Department  
P.O. BOX 6220  
Dearborn, MI 48121**



Debtor **Auto Supply Company, Inc.**

Case number (if known) \_\_\_\_\_

**Name and address**

26d.3. **ENTERPRISE FLEET SERVICES**  
**5715 WESTPARK DR.**  
**CHARLOTTE, NC 28217**

26d.4. **WELLS FARGO BANK, NA**  
**110 EAST BROWARD BLVD**  
**SUITE 1100**  
**FORT LAUDERDALE, FL 33301**

26d.5. **FISHER AUTO PARTS, INC.**  
**PO BOX 2246**  
**STAUNTON, VA**

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No  
☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory

**28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

Name	Address	Position and nature of any interest	% of interest, if any
KEY JR, CHARLES	197 HAYWOOD DRIVE ADVANCE, NC 27006	CEO	53.21%

Name	Address	Position and nature of any interest	% of interest, if any
LUPER, DANNY	2401 WINDMERE DRIVE WINSTON-SALEM, NC 27103	VP	46.79%

**29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?**

- ☒ No  
☐ Yes. Identify below.

**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No  
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value

**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation

Debtor **Auto Supply Company, Inc.**

Case number (if known)

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

Debtor Auto Supply Company, Inc.

Case number (if known) \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 8, 2018

/s/ Charles A. Key, Jr.

Signature of individual signing on behalf of the debtor

Charles A. Key, Jr.

Printed name

Position or relationship to debtor President

**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?**

☐ No

☒ Yes

PART 2 QUESTION 3

## ATTACHMENT TO STATEMENT OF FINANCIAL AFFAIRS (PART 2) NO. 3.1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	AMOUNT OF VALUE	DATES	REASON
ACE TOOL COMPANY	LOCK BOX #536491		ATLANTA	GA	30353-6491	9,165.46 21,650.81 30,816.27 TOTAL	9/10/2017 12/5/2017 TOTAL	SUPPLIES
ADP BOX 842875	PNC BANK C/O ADP LLC	20 COMMERCE WAY, STE 800	WOBURN	MA	01801-1057	5,693.06 1,880.81 1,741.86 14,489.97 5,360.56 29,166.26 TOTAL	8/28/2017 9/10/2017 10/10/2017 11/15/2017 12/19/2017 TOTAL	PAYROLL SERVICE
AETNA	P.O. BOX 88860		CHICAGO	IL	60695-1860	5,367.59 5,238.46 4,865.50 15,471.55 TOTAL	10/4/2017 10/31/2017 11/30/2017 TOTAL	INSURANCE
AMIN WORLD CORP OF AMERICAN	DEPT LA 24254		PASADENA	CA	91185-4254	1,265.56 1,931.61 4,803.67 8,000.84 53,578.98 TOTAL	7/28/2017 8/11/2017 9/10/2017 TOTAL	SUPPLIES
AMALIE OIL AMERICAN AUTO SUPPLY CO.	P.O. BOX 99744 P.O. BOX 4182		CHICAGO ARCHDALE	IL NC	60690-7544 27263	326.98 1,002.39 926.72 125.00 1,660.06 811.55 2,739.85 7,592.55 TOTAL	5/23/2017 6/15/2017 7/14/2017 7/28/2017 8/10/2017 9/10/2017 12/4/2017 TOTAL	SUPPLIES
AMERICAN EXPRESS	P.O. BOX 1270		NEWARK	NJ	07101-1270	161.90 40,210.42 40,372.32 TOTAL	10/31/2017 10/31/2017 TOTAL	CREDIT CARD PAYMENTS
AMERICAN HERITAGE LIFE	P.O. BOX 650514		DALLAS	TX	75265-0514	2,175.72 2,175.72 1,965.04 2,175.72 8,492.20 TOTAL	11/15/2017 12/6/2017 12/15/2017 12/15/2017 TOTAL	INSURANCE
AMSOIL INC.	925 TOWER AVE.		SUPERIOR	WI	54880	4,800.43 2,275.18 1877.55 8,953.16 TOTAL	9/10/2017 11/13/2017 12/12/2017 TOTAL	

PART 2 QUESTION 3

## ATTACHMENT TO STATEMENT OF FINANCIAL AFFAIRS (PART 2) NO. 3.1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	AMOUNT OF VALUE	DATES	REASON
BB&T 401K	P. O. BOX 580363		CHARLOTTE	NC	28258-0363	18,815.97	10/16/2017	
						18,837.88	10/30/2017	
						17,480.49	11/13/2017	
						17,412.43	11/27/2017	
						16,587.08	12/11/2017	
	10,852.95	1/4/2018						
	99,986.80	TOTAL						CREDIT CARD PAYMENTS
BB&T BANKCARD CENTER	P. O. BOX 580363		CHARLOTTE	NC	28258-0363	42,133.94	10/31/2017	
						63,296.06	12/18/2017	
						61,909.26	11/15/2017	
						33,800.11	1/3/2018	
						201,139.37	TOTAL	
BBB INDUSTRIES	DEPT #30761	P.O. BOX 790126	ST LOUIS	MO	63179-0126	108,103.58	10/19/2017	SUPPLIES
						59623.91	11/21/2017	
						70093.05	12/21/2017	
						237,820.54	TOTAL	
BCBS OF NORTH CAROLINA	P.O. BOX 580017		CHARLOTTE	NC	28258-0017	28,656.32	8/28/2017	INSURANCE
						6,291.59	11/9/2017	
						28,004.29	11/15/2017	
						4,185.18	11/16/2017	
						7,412.46	11/24/2017	
						26,524.15	11/27/2017	
						27,096.39	11/27/2017	
						19,612.04	11/30/2017	
						6,918.74	12/8/2017	
						18,407.95	12/14/2017	
						11,841.88	12/21/2017	
						22,087.32	1/2/2018	
207,038.31	TOTAL							
BINGHAM GROUP COMMERCIAL	600 HWY 801 SOUTH		ADVANCE	NC	27006	1,625.00	9/11/2017	RENT
						1,625.00	10/2/2017	
						1,625.00	10/2/2017	
						1,625.00	11/1/2017	
						1,625.00	12/12/2017	
	8,125.00	TOTAL						
BLANCO TACKABERY COMBS	STRATFORD POINT BUILDING (5TH FLOOR)	110 SOUTH STRATFORD ROAD	WINSTON-SALEM	NC	27104-4299	147.50	10/18/2017	PROFESSIONAL FEES
						1,240.00	5/24/2017	
						442.50	7/14/2017	
						1,180.00	9/10/2017	
						40,615.45	12/6/2017	
						104,197.50	1/5/2018	
						80,000.00	1/5/2018	
						227,822.95	TOTAL	
BOYD & HASSELL LLC	200 FIRST AVENUE, NW	SUITE 507	HICKORY	NC	28601	2,704.00	10/2/2017	RENT
						2,704.00	11/1/2017	
						2,704.00	12/12/2017	
						315,934.95	TOTAL	

## PART 2 QUESTION 3

## ATTACHMENT TO STATEMENT OF FINANCIAL AFFAIRS (PART 2) NO. 3.1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	AMOUNT OF VALUE	DATES	REASON
BRIAN T & CATHY S TARTON	1058 EVANGELINE DRIVE		LELAND	NC	28451-7992	1,419.00 4,639.00 4,639.00 4,639.00 1,419.00 1,419.00 18,174.00 TOTAL	9/1/2017 9/1/2017 11/1/2017 11/1/2017 11/1/2017 11/1/2017 TOTAL	RENT
CAROLINA HANDLING LLC	P.O. BOX 890352	CHARLOTTE	CHARLOTTE	NC	28289-0352	1,167.43 4,192.24 123.29 359.51 1,429.46 7,271.93 TOTAL	5/24/2017 7/14/2017 7/28/2017 8/11/2017 10/30/2017 TOTAL	SERVICES
CAUDILL'S COMMERCIAL ELEC	208 BODENHAMMER STREET		KERNERSVILLE	NC	27284	2,500.00 2,500.00 2,500.00 2,500.00 10,000.00 6,000.00 TOTAL	9/1/2017 10/2/2017 11/1/2017 12/12/2017 TOTAL	RENT
COASTAL EQUIPMENT INC	469 BELT ROAD		HAMPSTEAD	NC	28443	1,490.00	10/2/2017	SUPPLIES
DATA CHAMBERS LLC	3310 OLD LEXINGTON ROAD		WINSTON-SALEM	NC	27107	1,490.00 1,490.00 1,490.00 1,490.00 5,960.00 TOTAL	10/30/2017 11/24/2017 12/19/2017 TOTAL	SUPPLIES
DELL FINANCIAL SERVICES	PAYMENT PROCESSING CTR	P.O. BOX 5292	CAROL STREAM	IL	60197-5292	875.96 1,745.99 2,621.95 2,592.95 7,836.85 TOTAL	9/10/2017 10/2/2017 10/30/2017 11/24/2017 TOTAL	SECURED DEBT
DENSO PRODUCTS & SERVICES	P.O. BOX 601009		PASADENA	CA	91189-1009	24,511.86 24,278.80 48,790.66 TOTAL	8/11/2017 9/10/2017	SUPPLIES
DIXON HUGHES GOODMAN LLP	P.O. BOX 602828		CHARLOTTE	NC	28260-2828	17,016.00	1/5/2018	PROFESSIONAL FEES
DNU ENGINE COMPONENTS-18	FILE 50186		LOS ANGELES	CA	90074-0186	245.07 3,395.75 3,581.35 151.40 3,177.53 10,551.10 TOTAL	9/10/2017 9/10/2017 10/10/2017 10/10/2017 12/5/2017 TOTAL	SUPPLIES

## PART 2 QUESTION 3

## ATTACHMENT TO STATEMENT OF FINANCIAL AFFAIRS (PART 2) NO. 3.1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	AMOUNT OF VALUE	DATES	REASON
DUKE ENERGY	P. O. BOX 70516		CHARLOTTE	NC	28272-0516	8,193.99 1,210.55 489.39 913.87 779.54 581.35 392.68 1,234.93 610.70 6,136.83 345.78 6,180.13 1,434.13 394.83 566.18 278.78 2,227.64 713.94 3,499.01 661.45 328.77 37,174.47 TOTAL	9/10/2017 9/10/2017 9/10/2017 10/2/2017 10/2/2017 10/2/2017 10/2/2017 10/12/2017 10/12/2017 10/30/2017 10/30/2017 11/24/2017 11/24/2017 11/24/2017 12/7/2017 12/7/2017 12/19/2017 12/19/2017 1/2/2018 1/2/2018 1/2/2018 TOTAL	UTILITIES
ELECTROSWITCH	2010 YONKERS ROAD		RALEIGH	NC	27604	6,102.00 6,102.00 6,102.00 18,306.00 TOTAL	10/2/2017 11/1/2017 12/12/2017 TOTAL	RENT
ENGINE PARTS WAREHOUSE	P O BOX 856300	DEPT # 146	LOUISVILLE	KY	40285	1,418.86 2,561.57 3,633.81 10.78 7,625.02 TOTAL	8/10/2017 9/10/2017 12/6/2017 12/8/2017 TOTAL	SUPPLIES
ENTERPRISE FLEET MGMT	CUSTOMER BILLING	P.O. BOX 800089	KANSAS CITY	MO	64180-0089	26,993.93 23,348.39 24,091.88 74,434.20 TOTAL	10/5/2017 11/21/2017 12/5/2017 TOTAL	VEHICLE LEASING
EPICOR SOFTWARE CORP	P.O. BOX 671069		DALLAS	TX	75267-1069	11,393.35 2,520.42 11,393.35 498.06 11,393.35 1,021.00 22,786.70 2,010.49 2,520.42 65,537.14 TOTAL	9/10/2017 9/10/2017 10/10/2017 11/10/2017 10/30/2017 10/30/2017 12/19/2017 12/19/2017 12/19/2017 TOTAL	SERVICES
UQUALITY AUTOMOTIVE PROD.	DEPT LA 22888		PASADENA	CA	91185	44,676.03	9/20/2017	SUPPLIES
FCS AUTOMOTIVE	31800 RESEARCH PARK DRIVE		MADISON HEIGHTS	MI	48071	7,613.31	10/25/2017	SUPPLIES



## PART 2 QUESTION 3

## ATTACHMENT TO STATEMENT OF FINANCIAL AFFAIRS (PART 2) NO. 3.1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	AMOUNT OF VALUE	DATES	REASON
FIDELITY SECURITY LIFE IN	P.O. BOX 71250		PHILADELPHIA	PA	19176-6250	1,384.67 1,244.28 1,405.14 1,362.57 953.00 6,349.66 TOTAL	11/15/2017 11/15/2017 12/6/2017 12/6/2017 1/2/2018 TOTAL	INSURANCE
THE FINLEY GROUP	212 S. TRYON ST.	SUITE 1050	CHARLOTTE	NC	28281	15,000.00 15,000.00 53,066.95 50,000.00 20,000.00 153,066.95 TOTAL	11/7/2017 11/16/2017 12/21/2017 1/5/2018 1/5/2018 TOTAL	PROFESSIONAL FEES
FISHER AUTO PARTS	PO BOX 2246		STAUNTON	VA	24402-2246	48,590.35 12,361.93 872.57 280.00 87.36 1,368.76 214.18 41.91 63,817.06 TOTAL	10/13/2017 10/23/2017 10/30/2017 11/20/2017 11/29/2017 1/4/2017 1/4/2018 1/4/2018 TOTAL	SUPPLIES
FLEET FUELING	P.O. BOX 6293		CAROL STREAM	IL	60197-6293	30,299.08 28,593.81 26,505.38 26,505.38 111,903.65 TOTAL	10/24/2017 11/27/2017 12/27/2017 12/27/2017 TOTAL	SUPPLIES
FORD MOTOR COMPANY	BANK OF NEW YORK MELLON	DEPT CH 14147 FCSD-ICC	PALATINE	IL	60055-4147	40,914.81 52,835.19 93,750.00 TOTAL	10/16/2017 10/16/2017 TOTAL	SUPPLIES
GB REMANUFACTURING INC	2040 E CHERRY INDUSTRIAL		LONG BEACH	CA	90805-4410	7,590.59 2,821.50 6,844.50 25,967.49 43,224.08 TOTAL	7/28/2017 8/11/2017 9/10/2017 12/22/2017 TOTAL	SUPPLIES
GEM LOGISTICS INC	P.O. BOX 35382		GREENSBORO	NC	27425	14,200.00 5,590.00 7,910.00 8,175.00 2,705.00 2,645.00 2,735.00 2,690.00 2,095.00 48,745.00 TOTAL	9/10/2017 11/10/2017 11/10/2017 11/17/2017 11/24/2017 12/1/2017 12/8/2017 12/15/2017 12/22/2017 TOTAL	SUPPLIES



PART 2 QUESTION 3

## ATTACHMENT TO STATEMENT OF FINANCIAL AFFAIRS (PART 2) NO. 3.1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	AMOUNT OF VALUE	DATES	REASON SUPPLIES
GM SERVICE PARTS OPS	P. O. BOX 905053		CHARLOTTE	NC	28290-5053	123,209.39	11/16/2017	
						2,193.92	11/16/2017	
						74,596.69	11/16/2017	
						100,000.02	11/30/2017	
						182,454.41	10/4/2017	
						100,000.00	10/10/2017	
						111,000.00	10/12/2017	
						100,000.00	10/18/2017	
						100,000.00	10/19/2017	
						75,000.00	10/26/2017	
IEH AUTO PARTS LLC	16741 COLLECTIONS CENT DR		CHICAGO	IL	60693-0167	216,000.00	12/21/2017	SUPPLIES
						1,184,454.43	TOTAL	
						52,553.75	10/6/2017	
						36,232.32	10/6/2017	
						55,744.42	10/20/2017	
						27,277.85	10/20/2017	
						5,764.48	10/20/2017	
						19,661.84	10/31/2017	
						20,433.23	10/31/2017	
						49,697.55	11/1/2017	
						59,411.37	11/2/2017	
						49,591.68	11/3/2017	
						20,282.29	11/3/2017	
						18,912.08	11/3/2017	
						85,963.57	11/14/2017	
						111.88	11/14/2017	
						23,551.51	11/30/2017	
						23,633.02	11/30/2017	
						47,371.63	12/4/2017	
						47,724.71	12/4/2017	
INTERMEDIA.NET INC	DEPT LA 24328		PASADENA	CA	91185-4328	643,919.18	TOTAL	SERVICES
						1,917.61	9/10/2017	
						1,901.85	10/30/2017	
						1,915.47	12/12/2017	
						1,915.91	12/19/2017	
JEWELL STRICKLAND	2604 COULTER PLACE		WILMINGTON	NC	28409	7,650.84	TOTAL	RENT
						3,068.35	8/1/2017	
						3,068.35	9/1/2017	
						3,068.35	10/2/2017	
						9,205.05	TOTAL	
JOHNSON & TIPTON CYLINDER	HEAD REPAIR	P O BOX 546	GIBSON	NC	28343	3,455.00	11/29/2017	SUPPLIES
						1,420.45	9/10/2017	
						5,536.10	12/8/2017	
						10,411.55	TOTAL	
MDH PROPCO 2015 B LLC	ATTN: DEPARTMENT #500	P.O. BOX 896515	CHARLOTTE	NC	28289-6515	7,425.36	10/2/2017	SUPPLIES
						7,248.90	10/2/2017	
						7,425.36	11/1/2017	
						22,099.62	TOTAL	

PART 2 QUESTION 3

## ATTACHMENT TO STATEMENT OF FINANCIAL AFFAIRS (PART 2) NO. 3-1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	AMOUNT OF VALUE	DATES	REASON
METLIFE - GROUP BENEFITS	P.O. BOX 804466		KANSAS CITY	MO	64180-4466	10,323.40 9,976.64 20,102.99 8,674.24 49,077.27 TOTAL	8/28/2017 10/2/2017 12/6/2017 1/2/2018 TOTAL	INSURANCE
NC DEPARTMENT OF REVENUE	501 NORTH WILMINGTON STREET		RALEIGH	NC	27604	31,961.62 37,783.92 32,819.83 102,565.37 TOTAL	10/20/2017 11/20/2017 12/20/2017 TOTAL	SUPPLIES
NETWORK PRODUCTS LLC	200 ENTERPRISE ROAD		SOMERVILLE	TN	38068	24,805.27 11,779.19 16,564.66 53,149.12 TOTAL	10/10/2017 10/16/2017 11/17/2017 TOTAL	SUPPLIES
NITOR SOLUTIONS INC	3630 CLEMMONS RD	SUITE 303	CLEMMONS	NC	27012	12,922.30 192.15 8,068.38 16,532.05 5,579.84 43,294.72 TOTAL	10/2/2017 10/30/2017 11/8/2017 11/17/2017 12/1/2017 TOTAL	SERVICES
PARTSFLEET INC	2251 LYNX LN	SUITE 5	ORLANDO	FL	32804	49,235.47 48,481.39 97,716.86 TOTAL	10/30/2017 11/29/2017 TOTAL	SUPPLIES
PERFORMANCE RADIATOR	PACIFIC, LLC	P O BOX 24947	SEATTLE	WA	98124-0947	13,319.43 13,319.43 26,638.86 TOTAL	12/27/2017 12/27/2017 TOTAL	SUPPLIES
POWER STOP PREMIUM GUARD INC	6112C W. 73RD STREET P.O. BOX 105328		BEDFORD PARK ATLANTA	IL GA	60638 30348-5328	32,525.32 28,213.92 993.90 26,688.42 55,896.24 TOTAL	12/20/2017 12/19/2017 12/20/2017 11/14/2017 TOTAL	SUPPLIES SUPPLIES
PRIME AUTOMOTIVE	1617 NORWOOD ST SW		LENOIR	NC	28645-6426	42,563.91 3,656.86 3,713.89 44,377.63 1,574.36 34,636.04 21,332.92 TOTAL	10/19/2017 10/25/2017 11/8/2017 11/16/2017 11/21/2017 12/18/2017 12/22/2017	SUPPLIES
SMITH PROP. OF WILMINGTON	800 SHIPYARD BLVD.	SUITE # 11	WILMINGTON	NC	28412	4,445.00 4,445.00 4,445.00 13,335.00 TOTAL	10/2/2017 11/1/2017 12/12/2017 TOTAL	RENT

PART 2 QUESTION 3

## ATTACHMENT TO STATEMENT OF FINANCIAL AFFAIRS (PART 2) NO. 3.1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	AMOUNT OF VALUE	DATES	REASON
STANLEY HUNT DUPREE & RHI	P.O. BOX 890978		CHARLOTTE	NC	28289-0978	246.25	10/2/2017	INSURANCE
						2,915.90	10/17/2017	
						254.00	10/30/2017	
						2,915.90	10/31/2017	
						2,915.90	11/13/2017	
						246.75	11/24/2017	
						2,928.40	11/29/2017	
						2,454.75	12/12/2017	
THREE OAKS PARTNERS LLC	P.O. BOX 10189		WILMINGTON	NC	28404	2,672.90	1/4/2018	SUPPLIES
						17,550.75	TOTAL	
						2,781.46	10/9/2017	
						2,781.46	11/1/2017	
TIME WARNER CABLE	BOX 223085		PITTSBURGH	PA	15251-2085	2,781.46	12/12/2017	SERVICES
						2,781.46	TOTAL	
						13,176.87	7/3/2017	
						241.82	7/28/2017	
						55.83	7/28/2017	
						35.88	7/28/2017	
						2.74	7/28/2017	
						91.14	7/28/2017	
						13,097.56	7/28/2017	
						241.60	8/28/2017	
						55.61	8/28/2017	
						35.66	8/28/2017	
						35.66	8/28/2017	
						14,382.68	8/28/2017	
						85.66	9/11/2017	
UCI GOLDSBORO (18)	P O BOX 780		GOLDSBORO	NC	27533	241.71	10/2/2017	SUPPLIES
						497.07	10/2/2017	
						88.40	10/2/2017	
						35.88	10/2/2017	
						13,689.07	1/2/2018	
						56,090.84	TOTAL	
						2,724.60	6/16/1907	
						2,789.96	12/21/2017	
UNITED PARCEL SERVICE	P. O. BOX 7247-0244		PHILADELPHIA	PA	19170-0001	5,514.56	TOTAL	SERVICES
						1,432.01	7/28/2017	
						745.20	8/11/2017	
						1,978.06	8/28/2017	
						732.78	9/10/2017	
						353.65	9/11/2017	
						856.09	10/2/2017	
						728.79	10/12/2017	
UQUALITY AUTOMOTIVE PROD	DEPT LA 22888		PASADENA	CA	91185	6,826.58	TOTAL	SUPPLIES
						108.26	7/14/2017	
						78,529.21	7/28/2017	
						30,120.41	9/6/2017	
						108,757.88	TOTAL	

PART 2 QUESTION 3

## ATTACHMENT TO STATEMENT OF FINANCIAL AFFAIRS (PART 2) NO. 3.1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	AMOUNT OF VALUE	DATES	REASON
UTICA NATIONAL INSURANCE GROUP	P.O. BOX 6532		UTICA	NY	13504-6532	35,973.00	10/11/2017	INSURANCE
						35,680.00	11/10/2017	
						31,857.82	12/14/2017	
						103,510.82	TOTAL	
VALVOLUME LLC	P.O. BOX 117131		ATLANTA	GA	30368-7131	3,974.36	8/11/2017	SUPPLIES
						39,986.32	10/16/2017	
						38,231.23	12/19/2017	
						82,141.91	TOTAL	
WELLS FARGO MERCHANT FEES	110 EAST BROWARD BLVD	SUITE 1100	FORT LAUDERDALE	FL	33301	10,670.82	10/12/2017	BANKING FEES
						10049.85	11/10/2017	
						9586.69	12/12/2017	
						30,307.36	TOTAL	
WF (ASCO LOC)	110 EAST BROWARD BLVD	SUITE 1100	FORT LAUDERDALE	FL	33301	29,783.65	11/1/2017	SECURED DEBT
						28,598.60	12/1/2017	
						30,073.19	1/2/2018	
						88,455.44	TOTAL	
WF (HILCO FEE)	110 EAST BROWARD BLVD	SUITE 1100	FORT LAUDERDALE	FL	33301	17,359.67		SECURED DEBT
						17,565.98	11/1/2017	
						17,508.40	12/1/2017	
						17,733.19	1/2/2018	
WF (PARTLAND LOAN PMT)	110 EAST BROWARD BLVD	SUITE 1100	FORT LAUDERDALE	FL	33301	52,807.57	TOTAL	SECURED DEBT
						6,133.83	10/11/2017	
						6,466.67	11/13/2017	
						5,337.64	12/11/2017	
WF ACCOUNT ANALYSIS FEES	110 EAST BROWARD BLVD	SUITE 1100	FORT LAUDERDALE	FL	33301	17,938.14	TOTAL	BANKING FEES
						53,000.00	1/5/2017	
						30,776.00	10/31/2017	
						9,100.00	12/1/2017	
WF PP DEBIT CARDS	110 EAST BROWARD BLVD	SUITE 1100	FORT LAUDERDALE	FL	33301	25,000.00	12/9/2017	SUPPLIES
						35,000.00	12/13/2017	
						750.00	12/20/2017	
						1,000.00	12/20/2017	
						2,500.00	12/21/2017	
						157,126.00	TOTAL	
WINDSTREAM	P.O. BOX 9001013		LOUISVILLE	KY	40290-1013	8,129.44	11/24/2017	UTILITIES
						81.29	12/7/2017	
WORLD PAC INC.	37137 HICKORY STREET	P.O. BOX 3022	NEWARK	CA	94560-5522	8,210.73	TOTAL	SUPPLIES
						3,131.79	9/10/2017	
						3,072.64	11/15/2017	
						1,734.34	11/27/2017	
						3,395.78	12/7/2017	
						11,334.55	TOTAL	

UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF NORTH CAROLINA  
WINSTON-SALEM DIVISION

IN RE:

AUTO SUPPLY COMPANY, INC.,

Debtor.

§  
§  
§  
§  
§  
§

Case Number 18-\_\_\_\_\_  
Chapter 11

**Rule 2016 (b) -- DISCLOSURE OF ATTORNEY COMPENSATION**

1. Pursuant to 11 U.S.C. §329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor in contemplation of or in connection with the bankruptcy case is as follows:

Prior to the filing of this statement I have received:

(For prepetition services rendered)	\$ 104,197.50
(Retainer)	\$ 78,283.00
(For filing fee related to case)	\$ 1,717.00

Balance Due

(Fees as approved by the Bankruptcy Court, to be accrued at regular hourly rates.)

2. The source of the compensation paid to me was Debtor.
3. The source of compensation to be paid to me is the Debtor.
4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
  - a. Analysis of the Debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;



- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - c. Representation of the Debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - d. Representation of the Debtor in adversary proceedings and other contested bankruptcy matters;
  - e. Other provisions: Representation of the debtor in sale of all substantial assets of Debtor.
6. By agreement with the Debtor, the above-disclosed fee does not include the following services: N/A

Date: January 8, 2018

/s/Ashley S. Rusher

Ashley S. Rusher, NCSB# 14296  
Blanco Tackabery Matamoros, PA  
P.O. Drawer 25008  
Winston-Salem, NC 27114  
(336) 293-9000

**United States Bankruptcy Court  
Middle District of North Carolina**

In re Auto Supply Company, Inc.

Debtor(s)

Case No.

Chapter

11

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
--	----------------	----------------------	------------------

**-NONE-**

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date January 8, 2018Signature /s/ Charles A. Key, Jr.  
Charles A. Key, Jr.

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court  
Middle District of North Carolina**

In re **Auto Supply Company, Inc.**

Debtor(s)

Case No.

Chapter

**11**

**VERIFICATION OF CREDITOR MATRIX**

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **January 8, 2018**

**/s/ Charles A. Key, Jr.**

**Charles A. Key, Jr./President**

Signer/Title



1-800-RADIATOR (25)  
2550 EMPIRE DRIVE  
UNIT 114  
WINSTON SALEM, NC 27103

311 AUTOMOTIVE  
113 SALEM AVENUE  
NEW CASTLE, VA 24127

9TH STREET GARAGE  
110 9TH ST, SW  
ROANOKE, VA 24016

A1-CARDONE  
P.O. BOX 827267  
[HTTPS://WWW.CARDONE.COM](https://www.cardone.com)  
PHILADELPHIA, PA 19182

AAA IMPORTS INC.  
300 SOUTH SPRING STREET  
WINSTON-SALEM, NC 27101

AAMCO OF GARNER  
546 DYNAMIC DRIVE  
GARNER, NC 27529

ABBOTT, MICHAEL D  
0060 FRANKLIN RD  
GERMANTON, NC 27019

ABEE, RICKEY H  
206 TOWNSEND ST SE  
VALDESE, NC 28690

AC CORPORATION  
P.O. BOX 16367  
GREENSBORO, NC 27416-0367

AC DELCO/GM  
6200 GRAND POINT DR.  
MAIL CODE 485-303-713  
GRAND BLANC, MI 48439

ACE TOOL COMPANY  
LOCK BOX #536491  
ATLANTA, GA 30353-6491

ACR LOCKSMITH INC  
P.O. BOX 5932  
HIGH POINT, NC 27262

ADAMS, DENNIS  
5790 LITTLE OAK COURT  
GRANITE FALLS, NC 28630

ADP  
ONE ROSELAND BOULEVARD  
ROSELAND, NJ 07068

ADP BOX 842875  
PNC BANK C/O ADP LLC  
20 COMMERCE WAY, STE 800  
WOBURN, MA 01801-1057

ADT SECURITY SERVICES, INC.  
1 TOWN CENTER RD.  
BOCA RATON, FL 33486

ADVANCE AUTO PARTS  
AAP FINANCIAL SERVICES  
P O BOX 742063  
ATLANTA, GA 30374-2063

ADVANTAGE WIPING PRODUCTS  
P O BOX 328  
SPRING HOPE, NC 27882

ADVICS NORTH AMERICA, INC  
1650 KINGS VIEW DRIVE  
LEBANON, OH 45036

AIKEN, JOHN E  
4182 SPIREA DRIVE  
WILMINGTON, NC 28403

AIRTEX PRODUCTS LP  
P O BOX 936312  
ATLANTA, GA 31193-6312

AISIN WORLD CORP OF AMERI  
DEPT LA 24254  
PASADENA, CA 91185-4254

AKEBONO CORPORATION  
P.O. BOX 3236  
FARMINGTON, MI 48333

ALAMANCE COUNTY  
124 WEST ELM STREET  
GRAHAM, NC 27253-2802

ALDERMAN, PHILLIP K  
1124 VANNSTONE DR  
RALEIGH, NC 27603

ALLIANCE SPORTS GROUP LP  
P O BOX 203246  
DALLAS, TX 75320-3246

ALLIGOOD'S GARAGE  
527 N MARKET STREET  
WASHINGTON, NC 27889-4422

ALLRED JR, JERRY W  
162 BRAMTON CT  
WINSTON-SALEM, NC 27127

ALLRED, JERRY  
301 BUD SINK RD  
LEXINGTON, NC 27295

ALPHA WASTE INDUSTRIES  
P O BOX 1359  
WELCOME, NC 27374

ALPHA WASTE MANAGEMENT  
4157 OLD US HWY 52  
LEXINGTON, NC 27295

AMALIE OIL COMPANY  
P. O. BOX 99744  
CHICAGO, IL 60690-7544

AMERICAN AUTO SUPPLY CO.  
P. O. BOX 4182  
ARCHDALE, NC 27263

AMERICAN EXPRESS  
P O BOX 650448  
DALLAS, TX 75265-0448

AMERICAN HERITAGE LIFE  
P.O. BOX 650514  
DALLAS, TX 75265-0514

AMS AUTOMOTIVE, INC  
P. O. BOX 790379  
SAINT LOUIS, MO 63179-0379

ANDREW, KENNETH  
240 WELLS AVENUE  
WASHINGTON, NC 27889

APPERSON AUTOMOTIVE  
1601 APPERSON DRIVE  
SALEM, VA 24153

APPLE, ARTHUR J  
4100 GRANBURY DR  
GREENSBORO, NC 27405

APPLIED TELECOM, INC  
5820 N CHURCH ST STE D  
PMB 144  
GREENSBORO, NC 27455

ARC3 GASES  
P O BOX 1708  
DUNN, NC 28335-1708

ARENDALL, GARY  
404 PARK BOULEVARD  
WINSTON-SALEM, NC 27127

Ashley A. Edwards  
PARKER POE  
Three Wells Fargo Center  
401 South Tryon Street, Suite 3000  
Charlotte, NC 28202

AT&T  
C/O BANKRUPTCY  
4331 COMMUNICATIONS DR  
FLR 4W  
DALLAS, TX 75211

ATK NORTH AMERICA  
1102 W N CARRIER PKY  
STE 100  
GRAND PRAIRIE, TX 75050

ATLANTIC TIRE DISTRIBUTOR  
P O BOX 63382  
CHARLOTTE, NC 28263-3382

AUTO CLIPS & FASTENERS  
218 SKY SAIL BLVD  
NEW BERN, NC 28560

AUTO SPECIALTIES  
925 GROVEMONT ROAD  
RALEIGH, NC 27603

AUTO SUPPLY OF THOMASVILL  
122 NATIONAL HIGHWAY  
THOMASVILLE, NC 27360

AUTO VENTSHADE  
DEPT #2018  
P.O.BOX 11407  
BIRMINGHAM, AL 35246-2018

AUTO-PRO  
P.O. BOX 34190  
RICHMOND, VA 23234

AUTOBEST INTERNATIONAL  
2500 TROY AVE  
SOUTH EL MONTE, CA 91733

AUTOMOTIVE DIST NETWORK  
DEPT #816  
MEMPHIS, TN 38148-0816

AUTOMOTIVE FASTENERS, INC  
P.O. BOX 20686  
GREENSBORO, NC 27420-4859

AUTOMOTIVE SERVICE PRODUC  
P.O. BOX 942  
BURLINGTON, KY 41005

AUTOMOTIVE SYSTEMS  
P O BOX 269  
WILDWOOD, PA 15091

AUTOPART INTERNATIONAL  
P.O. BOX 419250  
BOSTON, MA 02241-9250

AUTOPLUS AUTO PARTS  
16741 COLLECTION CENTER D  
CHICAGO, IL 60693

AUTOTEK  
300 CIRCLE LANE  
RALEIGH, NC 27603

AUTOZONE, INC  
P.O. BOX 791409  
BALTIMORE, MD 21279-1409

BAITY'S DISCOUNT TIRE  
1081 SALISBURY RIDGE ROAD  
WINSTON-SALEM, NC 27127

BALLREE, EMMETT F  
789 EDEN DRIVE  
SOUTHPORT, NC 28461

BARBOUR'S TRUCK & TRAILER  
P. O. BOX 20693  
RALEIGH, NC 27619

BAREFOOT JR, HENRY S  
100 RAND ROAD  
RALEIGH, NC 27603

BARLOW, RICHARD R  
130 WOODTREE LANE  
WINSTON-SALEM, NC 27107

BARNES ELECTRIC  
7388 FOX CHASE DRIVE  
TRINITY, NC 27370

BARNETTE, MICHAEL R  
936 REEDY CREEK ROAD  
LEXINGTON, NC 27295

BASHAM OIL COMPANY  
2428 ROANOKE AVE  
ROANOKE, VA 24015

BATTERY TREE  
P O BOX 427  
KERNERSVILLE, NC 27285-0427

BAUCOM, JOSEPH J  
6531 GLENN TEAGUE ROAD  
CHARLOTTE, NC 28216

BBB INDUSTRIES, LLC  
8410 WOLF LAKE DR. #101  
BARTLETT, TN 38133

BCBS  
P.O. BOX 580017  
CHARLOTTE, NC 28258-0017

BCE SOUTH  
P O BOX 829  
Daphne, Alabama 36526  
INDIAN TRAIL, NC 28079

BCI PERFORMANCE WAREHOUSE  
465 MEMORIAL DR. SE  
29627 Renaissance Blvd.  
ATLANTA, GA 30312

BEAL, FORREST S  
893 OLD US HWY 52 S  
MT AIRY, NC 27030

BECK/ARNLEY  
2375 MIDWAY LN  
SMYRNA, TN 37167

BELL, BENJAMIN  
905 WESTSIDE DR.  
KERNERSVILLE, NC 27284

BENSON, RONNIE D  
804 FOREST DRIVE  
GARNER, NC 27529

BFPE INTERNATIONAL SECUR.  
P.O. BOX 791045  
BALTIMORE, MD 21279-1045

BILL BLACK CADILLAC, OLDS  
601 E. BESSEMER AVENUE  
GREENSBORO, NC 27405

BINGHAM GROUP COMMERCIAL  
ATTN: KEN BINGHAM  
600 HWT 801 S.  
ADVANCE, NC 27006

BINGHAM, STEPHANIE H  
931 FRED MILLER RD  
LEXINGTON, NC 27292

BLACKMON, DEANGELO D  
2654 DALLAS DR.  
WINSTON-SALEM, NC 27107

BLACKMON, DONALD C  
4430 PARMELE RD  
CASTLE HAYNE, NC 28409

BLUECAFFE  
4995 REYNOLDA RD  
WINSTON SALEM, NC 27106



BOB KING AUTOHAUS  
5115 NEW CENTRE DRIVE  
WILMINGTON, NC 28406

BOB KING AUTOMOTIVE GROUP  
1601 SILAS CREEK PARKWAY  
WINSTON SALEM, NC 27127

BOLICK, DONALD C  
4370 LISA DRIVE  
WINSTON-SALEM, NC 27103

BOND, JIMMIE W  
4525 FOX ROAD  
RALEIGH, NC 27616

BOOZER, ZACHARY C  
1478 COUNTRY MEADOW LANE  
KERNERSVILLE, NC 27284

BOSTIC, LARRY J  
1016 ZELL EATON ROAD  
PINNACLE, NC 27043

BOWMAN JR, PHILIP L  
6160 PINE HALL ROAD  
WALNUT COVE, NC 27052

BOYD HASSELL IND & COM PRO  
200 FIRST AVE NW  
SUITE 507  
Hickory, NC 28601-4000

BOYETTE, JOHN T  
3537 APACHE DRIVE  
RALEIGH, NC 27609

BRAKE PARTS INC LLC  
P O BOX 74008089  
CHICAGO, IL 60674-8089

BRANCH JR, ROLAND D  
1908 SAFFRON PLACE  
WINSTON-SALEM, NC 27127

BREWER, WALTER E  
1510 ANDOVER AVENUE  
GREENSBORO, NC 27405

BROACH, REGINALD K  
2618 SUMAC LANE  
BURLINGTON, NC 27215

BROOME JR, ROBERT J  
7554 LONG VALLEY DR  
HARRISBURG, NC 28075

BROTHERS RESEARCH CORP  
P O BOX 317  
BURLINGTON, NC 27216

BROWN, JOE B  
1480 23RD ST SW  
HICKORY, NC 28602

BROWN, RICHARD L  
171 COUNTRY CIRCLE  
ADVANCE, NC 27006

BROWNING, HERMAN L  
806 CYPRESS ST  
GREENSBORO, NC 27405

BRYAN CONTRACATING SERVICE  
816 DEER HOLLOW CT  
WAKE FOREST, NC 27587

BRYANT, ALLEN R  
3815 TILLMAN ROAD  
CHARLOTTE, NC 28208

BURKETT, JAMES M  
6329 GRANBY ST  
WILMINGTON, NC 28409

BURLINGTON MUNICIPLE BUILDING  
P.O. BOX 1358  
BURLINGTON, NC 27216

BURLINGTON ROYALS  
P.O. BOX 1143  
BURLINGTON, NC 27216

BUTLER III, EUGENE  
3428 CROSSWINDS ROAD  
CHARLOTTE, NC 28227

BUTLER, TINA L  
5738 WALKER CHAPEL RD  
MORGANTON, NC 28655

BYERLY, JENNIFER B  
3966 HILLCREST CT  
SOPHIA, NC 27350

CALDWELL, CHRIS J  
327 S CHERRY ST  
KERNERSVILLE, NC 27284

CALDWELL, RICHARD  
5556 VIEWCOURT PARK  
HICKORY, NC 28602

CANUP, THOMAS D  
191 EAST THOMAS RD  
THOMASVILLE, NC 27360

CAPITAL CHRYSLER  
P O BOX 2089  
GARNER, NC 27529

CAPITAL CITY AUTO LLC  
1445 MECHANICAL BLVD.  
GARNER, NC 27252

CAPITAL FORD  
P.O. BOX 4069  
WILMINGTON, NC 28406

CAPPS, WILLIAM  
308 WICKER STREET  
GIBSONVILLE, NC 27249

CARLYLE, RICKY O  
133G CHAUCER MANOR LANE  
KERNERSVILLE, NC 27284

CAROLINA HANDLING LLC  
P.O. BOX 890352  
CHARLOTTE, NC 28289-0352

CAROLINA IND BATTERY INC  
P.O. BOX 298  
PFAFFTOWN, NC 27040

CAROLINA KIA OF HP  
2431 N. MAIN STREET  
HIGH POINT, NC 27262

CAROLINAS AUTO SUPPLY HOU  
2135 TIPTON DRIVE  
P O BOX 36409  
CHRLLOTTE, NC 28236

CARTLEDGE, RICHARD L  
2127 MCKNIGHT MILL RD  
GREENSBORO, NC 27405

CATAWBA COUNTY TAX COLLEC  
P.O. BOX 368  
NEWTON, NC 28658-0368

CATES, DONALD R  
120 PAGETOWN ROAD  
ELON, NC 27244

CATES, MICHAEL A  
PO BOX 438  
TOBACCOVILLE, NC 27050

CAUDILL, DANIEL  
2680 GRIFFITH ROAD  
WINSTON-SALEM, NC 27103

CAUDLE COMMERCIAL ELECTRIC  
208 E. BODENHAMER ST.  
KERNERSVILLE, NC 27284

CENTURYLINK LEGAL  
100 CENTURYLINK DRIVE  
MONROE, LA 71203

CHAPPELL, CYNTHIA C  
6900 GUY-JOHNSON LANE  
RALEIGH, NC 27603

CHAPPELL, EDWARD G  
1503 MIRIAM AVENUE  
GARNER, NC 27529

CHASON DIESEL SEVICES  
P O BOX 1126  
GARNER, NC 27529

CHEEK, DESMOND M  
5700 CLOVIS RIDGE RD  
WAKE FOREST, NC 27587

CHILDERS, JEROMY S  
212 CATES AVE  
BURLINGTON, NC 27215

CHINNIS JR, ROBERT C  
100 NEUSE BEND RD  
SMITHFIELD, NC 27577

CITY OF BURLINGTON  
P O BOX 1358  
BURLINGTON, NC 27216-1358

CITY OF GREENSBORO  
300 WEST WASHINGTON STREET  
GREENSBORO, NC 27401

CITY OF HICKORY  
DUMPSTER RENTAL  
P O BOX 580069  
CHARLOTTE, NC 28258-0069

CITY OF HICKORY  
PO BOX 580069  
CHARLOTTE, NC 28258-0069

CITY OF HICKORY UTILITIES  
76 NORTH CENTER STREET  
HICKORY, NC 28601

CITY OF HIGH POINT UTILITIES  
P.O. BOX 230  
HIGH POINT, NC 27261

CITY OF MOUNT AIRY  
P.O. BOX 1725  
MOUNT AIRY, NC 27030-1725

CITY OF MOUNT AIRY  
P.O. BOX 1725  
MOUNT AIRY, NC

CITY OF MT AIRY  
P.O. BOX 1725  
MOUNT AIRY, NC

CITY OF RALEIGH UTILITIES  
222 W. HARGETT ST.  
CHARLOTTE, NC 28202

CITY OF WINSTON-SALEM UTILITIES  
101 N. MAIN STREET  
WINSTON-SALEM, NC 27101

CLEARPLUS INC.  
97 DEWITT STREET  
GARFIELD, NJ 07026

CLODFELTER, KELLY S  
101 OAK FOREST LANE  
TRINITY, NC 27370

CLOUD, WALTER J  
120 MYRTLE DRIVE  
MT AIRY, NC 27030

COASTAL EQUIPMENT INC  
469 BELT ROAD  
HAMPSTEAD, NC 28443

COATES, RANDY L  
5711 ARROWOOD LANE  
RALEIGH, NC 27606

COOK, STACEY D  
1377 NC 86-S  
PO BOX 146  
PROSPECT HILL, NC 27314

COOKE, SHANNON H  
4309 FORESTWOOD DRIVE  
GREENSBORO, NC 27405

COOPER, DANNY C  
664 S. FAYETTEVILLE ST  
LIBERTY, NC 27298

CORDER, RODERICK G  
3837 MAMIE MAY RD  
FRANKLINVILLE, NC 27248

CORNELISON, HOYLE  
429 ALDRIDGE ROAD  
ARCHDALE, NC 27263

COUCH, TERRY M  
182 MAJOR ROAD  
ADVANCE, NC 27006

CRC INDUSTRIES, INC.  
P.O. BOX 8500-S 6150  
PHILADELPHIA, PA 19178

CREECH AUTO SALES  
3209 BENSON ROAD  
GARNER, NC 27529

CREED, BEVERLY  
7816 CW MOBILE PARK DRIVE  
EAST BEND, NC 27018

CRESCENT FORD  
100 OLD WINSTON ROAD  
P. O. BOX 5628  
HIGH POINT, NC 27262

CREWS, MICHAEL T  
951 RIDINGS RD  
LEWISVILLE, NC 27023

CROWLEY, TIMOTHY J  
111 SALEM PL CRT  
CLEMMONS, NC 27012

CROWN AUTOMOTIVE GROUP  
445 ATLANTA SOUTH PARKWAY  
SUITE # 135  
COLLEGE PARK, GA 30349-5908

CRP INDUSTRIES, INC.  
P.O. BOX 33181  
NEWARK, NJ 07188-3181

CRYSTAL SPRINGS  
P.O. BOX 660579  
DALLAS, TX 75266-0579

CUSTOM BUSINESS PRINTING  
P. O. BOX 13547  
GREENSBORO, NC 27415-3547

D&E CAR EXCHANGE INC  
6220 MARKET STREET  
WILMINGTON, NC 28289

DARNELL, DOUGLAS  
7831 BEATTIES FORD RD  
CHARLOTTE, NC 28216

DASH DESIGN  
615 W KNOX ROAD  
TEMPE, AZ 85284

DATA CHAMBERS  
3310 OLD LEXINGTON RD  
WINSTON-SALEM, NC 27107

DAVID WESTCOTT BUICK/PONT  
P O BOX 1598  
BURLINGTON, NC 27216-1598



DAVIS, MARSHALL L  
8401 OLD STAGE ROAD  
RALEIGH, NC 27603

DAVIS, ROMERA S  
188 RIDGEWAY LANE  
CLAYTON, NC 27520

DELL  
DBC DELL BS CREDIT REV ACCTR  
1 DELL WAY  
ROUND ROCK, TX 78864

DELL CORNING CORPORATION  
575 JOHN DODD RD  
SPARTANBURG, SC 29303

DELP, JESSICA R  
912 PILOT POWER DAM RD  
PILOT MTN., NC 27041

DENSO PRODUCTS & SERVICES  
P.O. BOX 601009  
PASADENA, CA 91189-1009

DENTON, FRANK  
213 VFW ROAD  
MORGANTON, NC 28655

DEVLIN, MARK S  
129 CARRIAGE HOUSE TRL  
GARNER, NC 27529

DIBLER, DENNIS S  
3306 WATSON CHURCH RD  
MONROE, NC 28110

DICK SHIRLEY-(11)  
P O BOX 480  
BURLINGTON, NC 27216-0480

DICK SHIRLEY-(17)  
P O BOX 480  
BURLINGTON, NC 27216-0480

DIESEL ENGINE & REPAIR  
1547 GRAHAM-HOPEDALE ROAD  
BURLINGTON, NC 27217

DIESEL EQUIPMENT COMPANY  
P O BOX 538213  
ATLANTA, GA 30353

DNJ ENGINE COMPONENTS-18  
FILE 50186  
LOS ANGELES, CA 90074-0186

DONAHUE, THOMAS D  
3413 BETHEL RD  
WILMINGTON, NC 28409

DOUGLAS BATTERY &  
AUTO CARE  
575 NORTH BROAD ST  
WINSTON-SALEM, NC 27101

DOVER CYLINDER HEAD SERVI  
1489 CEDAR LANE  
GREENVILLE, SC 29617

DPAC INVESTMENTS INC  
6201 MARKET STREET  
WILMINGTON, NC 28405

Duane M. Geck  
SEVERSON & WERSON  
One Embarcadero Center, Suite 2600  
San Francisco, CA 94111

DUCKETT, STEPHEN B  
1711 LONG PAW LANE  
CHARLOTTE, NC 28214

DUKE POWER BANKRUPTCY DEPT.  
526 S. CHURCH STREET  
CHARLOTTE, NC 28202

DURHAM, DAVID M  
6029 WALKING STICK TRAIL  
RALEIGH, NC 27603

DUTY TIRE  
405 TRYON ROAD  
RALEIGH, NC 27603

E-Z GLASS INC  
503 W GARNER ROAD  
GARNER, NC 27529

EAST PENN MFG CO, INC  
P O BOX 784191  
PHILADELIPHIA, PA 19178-4191

EATON, STEVE M  
138 EATON ROAD  
MT. AIRY, NC 27030

EDWIN W JONES  
110 STEEPLE HEIGHTS LANE  
MORGANTON, NC 28655

ELECTROSWITCH, INC.  
2010 YONKERS ROAD  
RALEIGH, NC 27604

ENGINE PARTS WAREHOUSE  
P O BOX 856300  
DEPT # 146  
LOUISVILLE, KY 40285

ENTERPRISE FLEET SERVICES  
5715 WESTPARK DR.  
Charlotte, NC 28217

ENVIRO-MASTER SERVICES  
PO BOX 12350  
CHARLOTTE, NC 28220

EPICOR SOFTWARE CORP  
P.O. BOX 671069  
DALLAS, TX 75267-1069

EPICORE  
804 LAS CIMAS PKWY  
SUITE 303  
Austin, TX 78746

ESTES EXPRESS LINES  
P.O. BOX 25612  
RICHMOND, VA 23260-5612

EVANSTON INSURANCE COMPANY  
C.O I.G.O. INSURANCE AGENCY, INC.  
RALEIGH, NC 27612

EVERETT CHEVROLET, INC.  
161 HIGHWAY 70 SE  
HICKORY, NC 28601

EXCALIBUR  
4820 BETHANIA STATION RD  
WINSTON SALEM, NC 27105

FAMILY AUTO SERVICE  
101 ST MARY'S ST  
GARNER, NC 27529

FASTENAL COMPANY  
PO BOX 1286  
WINONA, MN 55987-1286

FCS AUTOMOTIVE  
31800 RESEARCH PARK DRIVE  
MADISON HEIGHTS, MI 48071

FEDERAL EXPRESS CORP.  
P.O. BOX 371461  
PITTSBURGH, PA 15250-7461

FEDERAL-MOGUL CORPORATION  
P.O. BOX 636438  
CINCINNATI, OH 45263-6438

FERGUSON, BLAKE P  
117 STAFFORD ANNEX  
KERNERSVILLE, NC 27284

FINISHMASTER, INC.  
1643 SOLUTIONS CENTER  
CHICAGO, IL 60677-1006

FJC, INC.  
101 COMMERCIAL DRIVE  
MOORESVILLE, NC 28115

FLEETGISTICS  
PARTSFLEET, INC.  
2251 LYNX LANE  
SUITE 5  
ORLANDO, FL 32804

FLOW AUTOMOTIVE CENTER  
1400 SOUTH STRATFORD ROAD  
WINSTON-SALEM, NC 27103

FLOW BMW-MIMI  
2565 PETERS CREEK PARKWAY  
WINSTON-SALEM, NC 27127

FLOW CHEVROLET  
1400 S. STRATFORD RD  
WINSTON-SALEM, NC 27103

FLOW HONDA  
ATTN: BRENDA A/P  
2600 PETERS CREEK PKWY  
WINSTON-SALEM, NC 27127

FLOW LEXUS  
805 JONESTOWN ROAD  
WINSTON-SALEM, NC 27103

FORD MOTOR COMPANY  
Ford Customer Service Division  
Credit Department  
P.O. Box 6220  
Dearborn, MI 48121

FORREST JR, OLLIE  
100 EMORY DRIVE  
GREENSBORO, NC 27406

FORSYTH COUNTY TAX  
201 NORTH CHESTNUT STREET  
WINSTON-SALEM, NC 27101

FORTUNE, JOSHUA D  
141 ROCKHAVEN DR  
KING, NC 27021

FOX, DAVID  
1930 20TH AVE DR NE  
APT 31  
HICKORY, NC 28601

FRANCIS, WILLIAM T  
2918 PARK AVE  
WILMINGTON, NC 28403

FRANKLIN, PHILLIP R  
4841 DORSET RD  
WINSTON-SALEM, NC 27127

FRED JONES ENTERPRISES  
6200 SW 29TH STREET  
SUITE A  
OKLAHOMA CITY, OK 73179

FRIZSELL, CLARENCE Y  
1536 10TH ST PL NW  
HICKORY, NC 28601

FRYE, AVERY  
3460 DAY ROAD  
WALKERTOWN, NC 27051

FULP, BYRON D  
PO BOX 412  
WALKERTOWN, NC 27051

G & K SERVICES  
P O BOX677057  
DALLAS, TX 75267-7057

G J HOPKINS INC  
ATTN: JEANETTE BLAIR  
P.O. BOX 12467  
ROANOKE, VA 24025

GAINEY, STEPHEN  
5795 GAYRAY ST  
CLEMMONS, NC 27012

GARNER AUTO INSPECTIONS  
1100 W GARNER ROAD  
GARNER, NC 27529

GARNER AUTO SPECIALISTS  
250 NEW FIDELITY CENTER  
GARNER, NC 27529

GARNER AUTO SPECIALISTS  
1530 BENSON ROAD  
GARNER, NC 27529

GB REMANUFACTURING INC  
2040 E CHERRY INDUSTRIAL  
LONG BEACH, CA 90805-4410

GC&F ENTERPRISE  
27 RIVER BLUFF  
HOSCHSTON, GA 30548

GEM LOGISTICS  
7800 FALLS OF NEUSE ROAD  
RALEIGH, NC 27624

GEM LOGISTICS, INC  
P.O. BOX 35382  
GREENSBORO, NC 27425

GENERA CORPORATION  
P O BOX 205188  
DALLAS, TX 75320-5188

GILBERT, ROBERT W  
186 LITTLE BIT LANE  
PILOT MT., NC 27041

GLENN, JEFFREY  
P.O.BOX 4661  
WINSTON-SALEM, NC 27115

GLOBAL PARTS DISTRIBUTION  
P O BOX 3045  
MACON, GA 31205

GM SERVICE PARTS OPERATIO  
P. O. BOX 905053  
CHARLOTTE, NC 28290-5053

GMB NORTH AMERICA  
100 HERROD BLVD.  
DAYTON, NJ 08810

GOLDMAN, JACK  
1608 - 3 WILLOUGHBY PARK COURT  
WILMINGTON, NC 28412

GRAINGER  
DEPT 808953830  
PALATINE, IL 60038-0001

GRAY, MILLARD W  
137 BRADFORD CIRCLE  
CLAYTON, NC 27527

GREEN FORD LINCOLN  
3800 W WENDOVER AVE.  
GREENSBORO, NC 27407

GRIGGS, WILLIAM  
3224 MAIN STREET  
WINSTON-SALEM, NC 27127

GRIMES, TAMMY  
3909 NORTH MAIN STREET  
HIGH POINT, NC 27265

GSP NORTH AMERICA  
P.O. BOX 161690  
BOILING SPRINGS, SC 29316

GUILFORD COUNTY TAX DEPT.  
PO BOX 71072  
CHARLOTTE, NC 28272-1072



GUTHRIE, DOUGLAS  
12117 FROGS LEAP CT  
CHARLOTTE, NC 28277

HAILE, SANDRA  
P.O. BOX 101  
GERMANTON, NC 27019

HALEY, RICHARD S  
114 MAVERICK TRAIL  
KING, NC 27021

HALL, KENNETH J  
102 DANIEL RD  
ROCKY POINT, NC 28457

HALO BRANDED SOLUTIONS  
3182 MOMENTUM PLACE  
CHICAGO, IL 60689-5331

HAMMER, THOMAS C  
2511 1/2 CAMPBELL ST  
GREENSBORO, NC 27405

HAMMOCK, DENNIS  
5038 FRIENDSHIP CIRCLE RD  
EAST BEND, NC 27018

HANSEN, BRAD C  
310 EAST D STREET  
ERWIN, NC 28339

HARDEN, D JAMES  
1863 TURNER RD Lot 41  
MEBANE, NC 27302

HARRIS, DENISE L  
107 JOSIE LANE  
KING, NC 27021

HART, AMANDA E  
PO BOX 1192  
LELAND, NC 28451

HAWES, ALBERT  
4375-101 BIRCHWOOD DR  
WILMINGTON, NC 28405

HAYES, TAYLOR I  
4016 EASTSIDE CT  
WINSTON-SALEM, NC 27127

HEATH, CHARLES L  
1112 FAIRWAY VILLAS DR  
WAKE FOREST, NC 27587

HEATH, SPENCER  
362 LYNNHAVEN PARK DR  
WINSTON-SALEM, NC 27107

HEDRICK, EDWARD D  
102 HINKLE ST  
THOMASVILLE, NC 27360

HELTON, RICHARD  
2487 TWINBROOK ROAD  
HICKORY, NC 28602

HENNESSY INDUSTRIES INC.  
P. O. BOX 91492  
CHICAGO, IL 60693

HILL'S AUTO SERVICE  
3612 BENSON ROAD  
GARNER, NC 27529

HINSHAW'S CHEVELLE PARTS  
1248 NC HWY 87 NORTH  
ELON, NC 27244

HINSON, GRACE  
4813 SINCLAIR DR  
RALEIGH, NC 27616

HITACHI AUTOMOTIVE SYSTEM  
AMERICAS, INC  
DRAWER CS198-281  
ATLANTA, GA 30384-8281

HOCUTT'S AUTO SERVICE  
324 SHERWEE DRIVE  
RALEIGH, NC 27603

HOLLOWAY, ANTHONY J  
8622 BUTTERFIELD CT  
HARRISBURG, NC 28075

HOOD, MARK P  
2533 SANDERS ROAD  
WILLOW SPRING, NC 27592

HOOTON, KEVIN  
6312 STEARMAN COURT  
WILMINGTON, NC 28409

HOWELL, RANDALL G  
1296 MEADOWLARK RD  
WALNUT COVE, NC 27052

HUDSON'S HARDWARE INC  
305 BENSON ROAD  
GARNER, NC 27529

HUMPHRIES, JAMES K  
6241 BLUE BONNET LANE  
WINSTON-SALEM, NC 27103

HURT, DANIEL W  
2125 DARTMOUTH GLEN DR  
GARNER, NC 27529

HUTCHENS, HARRISON W  
4510 RIVER RIDGE ROAD  
PFAFFTOWN, NC 27040

HUTCHENS, JONATHAN B  
305 D SAVANNAH PLACE  
KING, NC 27021

I.G.O INSURANCE AGENCY, INC.  
8117 EBENEZER CHURCH DRIVE  
RALEIGH, NC 27612

ILDERTON DODGE-CHRY., PLY  
P. O. BOX 350  
HIGH POINT, NC 27261

IMPORT PARTS 1220(6)  
921 PETERS CREEK PARKWAY  
WINSTON SALEM, NC 27103

IMPORT PARTS 1270(16)  
921 PETERS CREEK PARKWAY  
WINSTON SALEM, NC 27103

INDEPENDENT PROJECT MANAG  
301 NORTH MAIN STREET  
SUITE 2502  
WINSTON-SALEM, NC 27101

INDOFF INCORPORATED  
P.O. BOX 842808  
KANSAS CITY, MO 64184-2808

INFOTRAC  
200 NORTH PALMETTO STREET  
LEESBURG, FL 34748

INMAN, MICHAEL T  
110 SAPPHIRE LANE  
PILOT MTN, NC 27041

INNOVATIVE MACHINE & SUPP  
820 ST. LOUIS AVE  
VALLEY PARK, MO 63088

INTEGRATED SUPPLY NETWK18  
P.O. BOX 405157  
ATLANTA, GA 30384-5157

INTEGRATED SUPPLY NETWORK  
P.O. BOX 405157  
ATLANTA, GA 30384-5157

INTERMEDIA  
DEPARTMENT LA 24328  
PASADENA, CA 91185

INTERNAL REVENUE SERVICE  
PO BOX 7346  
PHILADELPHIA, PA 19101

ISAAC, CHARLES E  
122 JONES CHAPEL RD  
MT AIRY, NC 27030

ISLEY, THOMAS  
1174 RUFF LEONARD RD  
LEXINGTON, NC 27295

ITW PERMATEX, INC.  
P.O. BOX 2174  
CAROL STREAM, IL 60132-2174

JAMES, WILLIAM  
1021 BEESONS FIELD DR  
KERNERSVILLE, NC 27284

JEFF GORDON CHEVROLET  
228 SOUTH COLLEGE RD  
WILMINGTON, NC 28403

Jeremy M. Downs  
GOLDBERG KOHN LTD  
55 East Monroe Street  
Chicago, IL 60603-5792

JERRY JOHNSON MOTORS  
3885 N PATTERSON  
WINSTON-SALEM, NC 27105

JOE BAKER EQUIPMENT SALES  
1000 DEVILS BACKBONE ROAD  
CINCINNATI, OH 45233

JOEY LEE  
13513 US HWY70 BUS. WEST  
CLAYTON, NC 27520

JOHN MCCLAMROCH  
169 N SUNSET RIDGE DR  
WILLOW SPRING, NC 27592

JOHNSON & TIPTON CYLINDER  
HEAD REPAIR  
P O BOX 546  
GIBSON, NC 28343

JOHNSON, CLAUDE R  
3509 NORMANDY RD  
GREENSBORO, NC 27408

JOHNSON, LINVILLE C  
136 HASTY HILL RD  
THOMASVILLE, NC 27360

JOHNSON, MICHAEL C  
1311 VALLEY ROAD  
GARNER, NC 27529

JONES, EDWIN  
110 STEEPLE HEIGHTS LANE  
MORGANTON, NC 28655

JONES, LARRY D  
5121 SYLVAN TRAIL  
TRINITY, NC 27370

JORDAN, BRUCE A  
1660 MACHINE SHOP RD  
HICKORY, NC 28602

JOSEPH C WOODARD PRINTING  
2815 S SAUNDERS ST  
RALEIGH, NC 27603

JOYCE, RANDY  
161 GUINNESS LANE  
MT. AIRY, NC 27030

JOYCE, ROY AND OLGA  
221 CREEK DRIVE  
MOUNT AIRY, NC 27030

KAPP, KARL  
286 ST. JAMES DR  
WINSTON-SALEM, NC 27107

KASSA, DAWN T  
601 NOVEMBER ST  
GARNER, NC 27529

KEITHLEY, DENNIS E  
625 PARKLAND CT  
WINSTON-SALEM, NC 27127

KELLY JR, HAYWOOD N  
24 PINECREST PKWY  
WILMINGTON, NC 28401

KEMP TECHNOLOGIES  
1540 BROADWAY  
FL 23  
NEW YORK, NY 10036

KENNEDY OFFICE SUPPLY CO  
4211-A ATLANTIC AVE  
RALEIGH, NC 27604

KENNEDY OIL COMPANY, INC.  
P. O. BOX 5349  
HIGH POINT, NC 27262

KENNEY, DANIEL W  
1519 VILLAGE DR. APT 1  
WILMINGTON, NC 28401

KERNERSVILLE DODGE, INC.  
950 HIGHWAY 66 SOUTH  
KERNERSVILLE, NC 27284

KEY JR, CHARLES  
197 HAYWOOD DRIVE  
ADVANCE, NC 27006

KEY JR, CHARLES and KEY, KAREN  
197 HAYWOOD DRIVE  
ADVANCE, NC 27006

KEY MERCHANDISING-17  
125 WEST TRADE STREET  
SANFORD, NC 27330

KEY, C. ANDREW  
322 HANOVER ARMS CT  
WINSTON-SALEM, NC 27104

KEYSTONE AUTO. IND. (17)  
P O BOX 7441668  
ATLANTA, GA 30374-1668

KEYSTONE AUTOMOTIV 93813  
P. O. BOX 417450  
BOSTON, MA 02241-7450

KING, WADE  
563 ALSPAUGH DR  
WINSTON-SALEM, NC 27105

KLINGSPOR ABRASIVES INC  
PO BOC 2367  
HICKORY, NC 28603-2367

KRESS, MICHAEL  
1411 N SHORE DRIVE  
SOUTHPORT, NC 28461

KYB AMERICA, LLC  
7868 SOLUTION CENTER  
ADDISON, IL 60601

LAND-TEK GMS, INC.  
920 HIGHWAY 801 NORTH  
ADVANCE, NC 27006

LANIER, BARRY L  
2945 KECOUGHTAN RD  
PFAFFTOWN, NC 27040

Lawrence A. Lichtman  
HONIGMAN MILLER SCHWARTZ AND COHN LLP  
2290 First National Building  
660 Woodward Avenue  
Detroit, MI 48226

LEACH, ROGER R  
4127 CHANDLER DR  
WILMINGTON, NC 28405



LEE, MARY K  
106 SOMMERSET DRIVE  
CLAYTON, NC 27520

LEFTWICH, CHARLES A  
49 GRISSINGER CT  
GARNER, NC 27529

LEGGINS, JOHNNY W  
1736 MCCOMBS ST  
NEWTON, NC 28658

LEITH JAGUAR  
ATTN: ACCOUNTS PAYABLE  
P.O. BOX 40110  
RALEIGH, NC 27629

LEITH, INC  
5601 CAPITAL BOULEVARD  
RALEIGH, NC 27616

LEMON, TIMOTHY M  
913 APPLOOSA TRAIL  
KERNERSVILLE, NC 27284

LEMONDS, JERRY  
2015 WOODTOP COURT  
CHARLOTTE, NC 28214

LEMONS, KELBY L  
213 WHISPERING CREEK RD  
KING, NC 27021

LIBERTY ENGINE PARTS  
3250 SOUTH 76TH STREET  
PHILADELPHIA, PA 19153

LINDSAY, WILLIAM H  
1005 HADLEY MEADOWS DR  
RALEIGH, NC 27603

LIQUID SUNSHINE COFFEE  
P O BOX 1398  
MEBANE, NC 27302

LONG, JAMES H  
237 RASCOE-DAMERON RD  
BURLINGTON, NC 27217

LOWE, DILLON R  
4765 COOPER ROAD  
CLEMMONS, NC 27012

LUNSFORD, ROBERT E  
3551 FRYE BRIDGE ROAD  
CLEMMONS, NC 27012

MADONNA JR, JOHN  
9125 SAULS RD  
RALEIGH, NC 27603

MANN & HUMMEL PUROLATOR  
FILTERS LLC  
39270 TREASURY CENTER  
CHICAGO, IL 60694-9200

MANN AND HUMMEL FILTRATIO  
FKA WIX FILTRATION CORP  
P.O. BOX 73071  
CHICAGO, IL 60673-7071

MANNARINO, DONALD  
320 LAMESHUR LANE  
MONROE, NC 28110

MARCOM, GLENWOOD R  
217 FERN FOREST DR  
RALEIGH, NC 27603

MARKLE, DEBORAH I  
4020-C WHIRLAWAY COURT  
CLEMMONS, NC 27012

MARSH & MCLENNAN AGENCY  
3625 N ELM STREET  
P.O. BOX 9375  
GREENSBORO, NC 27429-0375

MARSHALL, JANIE LYNN  
6400 LAKE WHEELER ROAD  
RALEIGH, NC 27603

MARSHALL, JOHNNY S  
385 WILL JOHNSON RD  
THOMASVILLE, NC 27360

MATHERLY, JASON  
203 N. INMAN AVE  
BESSEMER CITY, NC 28016

MATHIS, CHARLES E  
326 STONE POST RD  
CHARLOTTE, NC 28217

MCALLISTER, GREGORY  
1025 CHEEK FARM ROAD  
WALNUT COVE, NC 27052

MCCALL, CHARLES F  
412 HAMILTON STREET  
BURLINGTON, NC 27217

MCCLAMROCH, JOHN  
169 N SUNSET RIDGE DR  
WILLOW SPRING, NC 27592

MCCLENNY, CLARENCE  
8016 FOXWOOD DR  
RALEIGH, NC 27615

MCCUMMINGS, DONALD  
4737 SUDSBEE LANE  
WALKERTOWN, NC 27051

MCGHINNIS, PAUL D  
1572 DAKOTA DRIVE  
HUDSON, NC 28638

MCLAMB, PHILLIP P  
2597 WHITE MEMORIAL CHIRCH RD  
WILOW SPRING, NC 27592

MCLENDON II, CHARLIE R  
109 PALMETTO CT  
GRAHAM, NC 27253

MCNEIL, KENNETH C  
1903 AUTUMN  
GREENSBORO, NC 27405

MDH PROPCO 2015-B LLC  
3715 NORTHSIDE PARKWAY NW  
NORTHWEST BUILDING 400  
SUITE 240  
ATLANTA, GA 30327

MEACHAM, MICHAEL K  
309 FREEMONT COURT  
GIBSONVILLE, NC 27249

MECKLENBURG COUNTY TAX  
P.O. BOX 71063  
CHARLOTTE, NC 28272-1063

MELAGA, WILLIAM  
849 RADAR ROAD  
ARARAT, NC 27007

MENA RODRIGUEZ, MICHAEL B  
322 W ELM ST  
GRAHAM, NC 27253

MERCEDES BENZ OF THE TRI.  
691 JONESTOWN ROAD  
WINSTON-SALEM, NC 27103

MERCHANTS CREDIT BUREAU  
P.O. BOX 1588  
AUGUSTA, GA 30903-1588

METCALF, CLIFTON A  
4524 BRASSFIELD DR  
WINSTON-SALEM, NC 27105

MEVOTECH LP  
240 BRIDGELAND AVENUE  
TORONTO, ON

MID-STATE FORKLIFT, INC  
P O BOX 4007  
ARCHDALE, NC 27263

MIDTRONICS, INC.  
7000 MONROE STREET  
WILLOWBROOK, IL 60527

MILLER, DONALD C  
2417 PARK LANE  
CHARLOTTE, NC 28214

MILLER, KEITH  
205 BLUEGRASS DR  
WARRENTON, NC 27589

MITCHELL JR, ROY H  
121 OLD MURPHY ROAD  
ZEBULON, NC 27597

MODERN AUTOMOTIVE 2100470  
P O BOX 1770  
CLEMMONS, NC 27012-1770

MODERN IMPRESSION PRODUCT  
107-K CREEK RIDGE ROAD  
GREENSBORO, NC 27406

MOORE, WILLIAM  
1724 BUTLER STREET  
WINSTON-SALEM, NC 27107

MORRO, PAUL M  
11805 EDGEWATER CT  
RALEIGH, NC 27614

MOSES JR, MITCHELL  
1432 FONTANA AVE  
CHARLOTTE, NC 28206

MOUSER, CAROLYN E  
2507 CAUDLE STREET  
GERMANTON, NC 27019

MUNDY, MICHAEL A  
1939 EAST 3RD ST  
WINSTON-SALEM, NC 27101

MURPHY JR, ALBERT S  
4364 MORNINGSIDE DR  
WINSTON-SALEM, NC 27106

MURRAY'S TIRE  
1200-1202 S SAUNDERS ST  
RALEIGH, NC 27603

NAPA AUTO PARTS (11)  
GENUINE PARTS CO (1747)  
P O BOX 409043  
ATLANTA, GA 30384-9043

NAPA OF ROXBORO  
P O BOX 1359  
ROXBORO, NC 27573

NEAL, ROBERT W  
6360 MILL SPRING LANE  
BELEWS CREEK, NC 27009

NELSON'S TIRE  
1402 GARNER ROAD  
RALEIGH, NC 27610

NELSON, KENNETH D  
230 TANBRIDGE ROAD  
WILMINGTON, NC 28405

NELSON, MICHAEL L  
1454 PACK ROAD  
WALNUT COVE, NC 27052

NETWORK PRODUCTS LLC  
200 ENTERPRISE ROAD  
SOMERVILLE, TN 38068

NEVILLE, RONNIE Y  
123 BERRINGER LANE  
GARNER, NC 27529

NEW HANOVER CO TAX OFFICE  
P.O. BOX 580070  
CHARLOTTE, NC 28258-0070

NIELSEN, DALE W  
3647 MAYAPPLE COURT  
WAKE FOREST, NC 27587

NITOR  
3630 CLEMMONS RD.  
SUITE 303  
CLEMMONS, NC 27012

NOAH, STEVE N  
102 EVA CIR  
GARNER, NC 27529

NORRIS, KENNETH T  
6128 LAKE WHEELER RD  
RALEIGH, NC 27603

NORTH CAROLINA DEPARTMENT OF REVENUE  
BANKRUPTCY UNIT  
PO BOX 1168  
RALEIGH, NC 27602

NORTHSIDE CAR WASH  
3718 N PATTERSON AVENUE  
WINSTON SALEM, NC 27105

O'BRIEN, CONSTANCE A  
500 PRESSLER STREET  
WAKE FOREST, NC 27587

OLD DOMINION FREIGHT LINE  
P.O. BOX 198475  
ATLANTA, GA 30384-8475

OMEGA ENVIRONMENTAL TECH  
P.O. BOX 677629  
DALLAS, TX 75267-7629

OSBORNE, JOHN  
6505 COLTRANE MILL RD  
GREENSBORO, NC 27406

OSC AUTOMOTIVE INC  
330 S HALE AVE  
FULLERTON, CA 92831

PARKER II, HAROLD  
226 GREENTREE ROAD  
THOMASVILLE, NC 27360

PARKS CHEVROLET  
6441 NORTH TRYON  
P.O. BOX 560826  
CHARLOTTE, NC 28256-0826

PARKS CHEVROLET  
P. O. BOX 386  
KERNERSVILLE, NC 27285

PARKS, JERRY W  
2418 N CHURCH STREET  
BURLINGTON, NC 27217

PARKWAY FORD  
2104 PETERS CREEK PARKWAY  
WINSTON SALELM, NC 27127

PARKWAY SUBARU HYUNDAI  
5920 MARKET STREET  
WILMINGTON, NC 28405

PARTLAND, LLC  
3740 PATTERSON AVENUE  
WINSTON-SALEM, NC 27105

PARTLAND, LLC  
P.O. BOX 4859  
WINSTON-SALEM, NC 27115-4859

PARTLAND, LLC  
P.O. BOX 4859  
Winston Salem, NC 27115-4859

PARTSFLEET, INC  
P.O. BOX 2513  
ORLANDO, FL 32802



PATRIOT SANITATION MGMT  
P.O. BOX 125  
GARNER, NC 27529

PEACE STREET INSPECTIONS  
600 W PEACE ST  
RALEIGH, NC 27605

PERFORMANCE RADIATOR  
PACIFIC , LLC  
P O BOX 24947  
SEATTLE, WA 98124-0947

PERRY, TERRY J  
13725 LABARON DRIVE  
WILLOW SPRING, NC 27592

PHILLIPS, CHARLES B  
10515 FOX DEN TRL  
CHARLOTTE, NC 28214

PIEDMONT NATURAL GAS  
P.O. BOX 660920  
DALLAS, TX 75266-0920

PIEDMONT NATURAL GAS  
BANKRUPTCY DEPARTMENT  
4720 PIEDMONT ROW  
CHARLOTTE, NC 28210

PINKERTON CHEVROLET INC  
LYNCHBURG, INC.  
801 GRAVES MILL ROAD  
LYNCHBURG, VA 24502

PLEWS INC  
PO BOX 772948  
CHICAGO, IL 60677-0248

POOLE, THOMAS E  
410 WINDEMERE ROAD  
WILMINGTON, NC 28405

PORTER'S AUTOMOTIVE , INC  
2715 WILLIAMSON ROAD  
ROANOKE, VA 24012

PORTER, DAVID L  
1350 SPRINGDALE DRIVE  
BURLINGTON, NC 27215

POTEAT'S AUTO PARTS -11  
1906 N MAIN ST  
KANNAPOLIS, NC 28081

POWER STOP LLC  
6112C W. 73RD STREET  
BEDFORD PARK, IL 60638

POWERMAX USA  
11750 JERSEY BLVD  
RANCHO CUCAMONGA, CA 91730

PREMIUM GUARD INC  
P.O. BOX 105328  
ATLANTA, GA 30348-5328

PRIME AUTOMOTIVE WAREHOUSE  
P.O. BOX 741554  
ATLANTA, GA 30374-1154

PROTECTION 1 ALARM  
MONITORING INC  
P.O. BOX 219044  
KANSAS CITY, MO 64121-9044

PSNC ENERGY  
P.O. BOX 100256  
COLUMBIA, SC 29202

PUBLIC SERVICE COMPANY OF  
PAYMENT CENTER  
P. O. BOX 100256  
COLUMBIA, SC 29202-3256

R & B, INC.  
P. O. BOX 8500 (S-4565)  
PHILADELPHIA, PA 19178-4565

R DANIEL LUPER  
2401 WINDMERE DRIVE  
WINSTON SALEM, NC 27103

RABON, JIMMY L  
940 WEST COOKSEY DR  
THOMASVILLE, NC 27360

REDDICK, KEVIN  
7075 TURNPIKE RD  
ARCHDALE, NC 27263

REMY INC  
P.O. BOX 930197  
ATLANTA, GA 31193-0197

REPUBLIC INSURANCE AGENCY, INC.  
C/O I.G.O. INSURANCE AGENCY, INC.  
8117 EBENEZER CHURCH DRIVE  
RALEIGH, NC

REPUBLIC SERVICES-01  
PO BOX 9001099  
LOUISVILLE, KY 40290-1099

REYNOLDS, NEWELL  
4724 WHITE ROCK ROAD  
WINSTON-SALEM, NC 27105

RILEY, HEATHER  
2703 RAINS DRIVE  
HAW RIVER, NC 27258

RIVERS, DAVID  
402 ELAINE PLACE  
GARNER, NC 27529

ROANOKE GAS COMPANY  
P.O. BOX 70848  
CHARLOTTE, NC 28272-0848

ROBERTSON, HARRY P  
410 MATHER COURT  
GARNER, NC 27529

RODERICK CORDER  
3837 MAMIE MAY RD  
FRANKLINVILLE, NC 27248

ROGERS, CHRISTOPHER  
1769 SANDY CROSS RD  
BURLINGTON, NC 27217

ROSS, WILLIAM L  
1404 BEAR MOUNTAIN RD  
CHARLOTTE, NC 28214

RUMFELT, GEORGE M  
324 MELLON ROAD  
BELMONT, NC 28012

RYAN, JAMES J  
7250 LALANDA DRIVE  
LEWISVILLE, NC 27027

S.M. ARNOLD, INC  
7901 MICHIGAN AVE  
SAINT LOUIS, MO 63111-4103

SAINTSING, ARCHIE  
936 SCENIC WAY  
THOMASVILLE, NC 27360

SAPP, JAMES G  
200 PRESLEY DR  
WINSTON-SALEM, NC 27107

SCHAEFER II, JOHN  
279 DEER TRACK DR  
BURGAW, NC 28425

SCHLEY, DANIEL  
2005 SANDY PORTER RD  
#203  
CHARLOTTE, NC 28273

SECRIST, JAMES  
420 IDLEBROOK DRIVE  
KERNERSVILLE, NC 27284

SERVICE EXPRESS, INC.  
3854 BROADMOOR AVE, SE  
Grand Rapids, MI 49512

SEWARD, WILLIAM B  
2421 WICHITA PL  
GREENSBORO, NC 27405

SHEPHERD, BARRY T  
7502 SOMERSBY DR  
SUMMERFIELD, NC 27358

SHERRILL, AMANDA M  
7417 HAZELSTONE LANE  
LELAND, NC 28451

SIMON'S AUTO SALES  
13430 US HWY 70 EAST  
CLAYTON, NC 27520

SINK, BRADLEY  
185 WORKMAN RD  
SNOW CAMP, NC 27349

SIPE, GARRY  
2905 SPENCERS GROVE  
BROWN SUMMIT, NC 27214

SLIMM, WILLIAM  
5392 KINGSWELL DRIVE  
WINSTON-SALEM, NC 27106

SLOAN, JOSEPH P  
3412 GREYWOOD DRIVE  
RALEIGH, NC 27604

SMITH PROPERTIES OF WILMINGTON  
800 SHIPYARD BLVD.  
WILMINGTON, NC 28412

SMITH, DANNY J  
105 PINEBURR AVE SE  
VALDESE, NC 28690

SMITH, DAVID  
1806 OLD HOLLOW ROAD  
WALKERTOWN, NC 27051

SMITH, GEORGE E  
961 PILOT CHURCH ROAD  
PINNACLE, NC 27043

SMITH, JIMMY M  
2619 ICARD RHODHISS RD  
CONNELLY SPRINGS, NC 28612

SNOW, TIMOTHY J  
259 GLORIA DR  
MOUNT AIRY, NC 27030

SON, SHU PING and WANG, YONG  
C/O UNIVERSAL REALTY, LLC  
P.O. BOX 3883  
ATTN: ANGNES LAM  
CARY, NC 27519

SOUTHERN TIRE SALES  
615 CHAPEL HILL ROAD  
BURLINGTON, NC 27215

SPECTRIO  
720 BROOKER CREEK BLVD.  
STE 215  
OLDSMAR, FL 34677

SPECTRUM BUSINESS  
ATTN: RECOVERY DEPARTMENT  
3347 PLATT SPRINGS ROAD  
WEST COUMBIA, SC 29170

SPERBER, STEFFNY  
4095 OLD HOLLOW RD  
KERNERSVILLE, NC 27284

SPIVEY, WILLIAM A  
5305 KIRKWOOD CT  
RALEIGH, NC 27609

STANDARD MOTOR PRODUCTS  
93307 NETWORK PLACE  
CHICAGO, IL 60673-1933

STATE OF NC - EPROC  
P.O. BOX 752167  
CHARLOTTE, NC 28275-2167

STEELE JR, EDDIE K  
4915 LONGBURN LANE  
KERNERSVILLE, NC 27284

STEIL, WILLIAM J  
1817 MACO RD  
LELAND, NC 28451

STEVENS, BERNIE R  
244 RYAN ROAD  
MT AIRY, NC 27030

STEVENS, THOMAS W  
974 WOODVILLE ROAD  
MT AIRY, NC 27030

STRICKLAND, JEWEL  
2604 COULTER PLACE  
WILMINTON, NC 28409

SUITS, TIMOTHY  
6527 CEDARBERRY ROAD  
TRINITY, NC 27370

SUNLAND FIRE PROTECTION  
P.O. BOX 277  
JAMESTOWN, NC 27282

SUPER CLEAN SERVICES  
2926 DURANT DRIVE  
WINSTON SALEM, NC 27107

SURRY COUNTY TAX COLLECT.  
P O BOX 576  
DOBSON, NC 27017-0576

SWAFFORD, JOE  
3257 10TH AVE NE  
CONOVER, NC 28613

T K S ELECTRICAL CONTRACT  
P.O. BOX 863  
RURAL HALL, NC 27045

TAG AUTO SERVICE  
11048 CLEVELAND RD  
GARNER, NC 27529

TALK OF THE TOWN COUPONS  
1937 FLEMING ROAD  
GREENSBORO, NC 27410

TARLTON, BRIAN T. and TARLTON, CATHY S.  
1058 EVANGELINE DRIVE  
LELAND, NC 28451-7992

TART, CARL RANDOLPH  
3105 BARBER MILL ROAD  
CLAYTON, NC 27520

TASISTA, MICHAEL  
139 S. GORDON DRIVE  
WINSTON-SALEM, NC 27104

TAYLOR MOTOR COMPANY  
P.O. BOX 267  
WAYNESVILLE, NC 28786

TAYLOR, RONNY  
1008 JAPONICA LANE  
GREENSBORO, NC 27410

TAYLOR, WHITNEY L  
1545 TAYLOR ROAD  
EAST BEND, NC 27018

TEAGUE, GARY D  
36 PAR DRIVE  
GRANITE FALLS, NC 28630



TECHNICAL CHEMICAL COMP.  
3327 PIPELINE ROAD  
CLEBUME, TX 76033-0139

TENNECO AUTOMOTIVE OPERAT  
C/O TENNECO AUTOMOTIVE RS  
3864 SOLUTIONS CENTER  
CHICAGO, IL 60677-3008

TERMINIX COMPANY  
CENTRAL ACCOUNTING OFFICE  
P. O. BOX 14009  
GREENSBORO, NC 27415-4009

TERRY LABONTE CHEVROLET  
P.O. BOX 77758  
GREENSBORO, NC 27417-7758

THE CITY OF MOUNT AIRY UTILITIES  
300 S. MAIN STREET  
MOUNT AIRY, NC 27030

THE TIMKEN CORPORATION  
28838 NETWORK PLACE  
CHICAGO, IL 60673-1288

THOMAS, JAMES  
7017 SPLITROCK LANE  
CHARLOTTE, NC 28214

THOMPSON, DOUGLAS F  
912 PINEY GROVE RD  
LOT 51-A  
KERNERSVILLE, NC 27284

THOMPSON, RICHARD R  
6813 MCLEANSVILLE RD  
MCLEANSVILLE, NC 27301

THOMSON FINANCIAL  
P.O. BOX 415983  
BOSTON, MA 02241-5983

THORNTON JR, BILLIE T  
20 SANDERS RD  
BENSON, NC 27504

THORNTON, NORWOOD  
1606 BRIDGEPORT TERRACE  
HIGH POINT, NC 27265

THORNTON, TRACY S  
200 HILLINGTON ROAD  
GARNER, NC 27529

THREE OAKS PARTNERS LLC  
1131-B MILITARY CUTOFF ROAD  
WILMINGTON, NC 28405

TIME WARNER CABLE  
BOX 223085  
PITTSBURGH, PA 15251-2085

TOPPS, DONALD A  
99 MAPLEWOOD DRIVE  
KNIGHTDALE, NC 27545

TOWN OF KERNERSVILLE  
FINANCE DEPARTMENT  
P. O. DRAWER 728  
KERNERSVILLE, NC 27284

TOWN OF KERNERSVILLE UTILITIES  
P.O. BOX 728  
KERNERSVILLE, NC 27285-0728

TRANSCEDAR LTD/MOTORAD  
DEPT# 30796  
P O BOX 790126  
ST LOUIS, MO 63179

TRANSTAR INDUSTRIES INC  
501 COUNTRY ROAD 30  
FLORENCE, AL 35634

TRAVELERS INSURANCE  
C/O I.G.O. INSURANCE AGENCY, INCL  
8117 EBENEZER CHURCH DRIVE  
RALEIGH, NC 27612

TURN KEY TIRE  
1340 BOBBITT DRIVE  
GARNER, NC 27529

TUWELLA, LLC  
PO BOX 4859  
WINSTON SALEM, NC 27115

TUWELLA, LLC  
P.O. BOX 4859  
WINSTON, NC 27115-4859

TWC/SPECTRUM  
1900 BLUECREST LANE  
SAN ANTONIO, TX 78247

TYSINGER, JOE D  
116 VIRGINIA DRIVE  
THOMASVILLE, NC 27360

UCI GOLDSBORO (18)  
P O BOX 780  
GOLDSBORO, NC 27533

UHLER, EDWARD  
1938 HILLDALE DRIVE  
BURLINGTON, NC 27215

UNIFIRST CORPORATION  
526 PINEY GROVE ROAD  
KERNERSVILLE, NC 27284

UNITED PAPER COMPANY  
DIV OF HUFF PAPER CO  
P.O. BOX 7696  
RICHMOND, VA 23231

UNITED PARCEL SERVICE  
P. O. BOX 7247-0244  
PHILADELPHIA, PA 19170-0001

UQUALITY AUTOMOTIVE PROD.  
DEPT LA 22888  
PASADENA, CA 91185

US 70 INSPECTIONS  
716 US HWY 70 BUS WEST  
GARNER, NC 27529

UTICA INSURANCE COMPANY  
C/O I.G.O. INSURANCE AGENCY, INC.  
8117 EBENEZER CHURCH DRIVE  
RALEIGH, NC 27612

VALSPAR LOCKBOX 741667  
P,O BOX 741667  
ATLANTA, GA 30374-1667

VALVOLINE LLC  
P. O. BOX 117131  
ATLANTA, GA 30368-7131

VANEMAN, ERNEST P  
104 LEEWAY COURT  
CLAYTON, NC 27520

VANN YORK CHEVROLET INC  
321 EASTCHESTER DRIVE  
HIGH POINT, NC 27262

VARNER, JASON E  
281 WENDYS WAY  
CLEMMONS, NC 27012

VERIZON  
P O BOX 4830  
TRENTON, NJ 08650-4830

VERIZON  
P.O. BOX 4001  
ACWORTH, GA 30101

VESTAL PONTIAC, BUICK GMC  
900 HIGHWAY 66 SOUTH  
KERNERSVILLE, NC 27284

VICKREY, DONALD H  
2255 LEE DRIVE  
BURLINGTON, NC 27216

VIRGINIA TAX  
OFFICE OF CUSTOMER SERVICE  
PO BOX 1115  
RICHMOND, VA 23218-1115

VISTA-PRO AUTOMOTIVE, LLC  
75 REMITTANCE DRIVE  
SUITE 6007  
CHICAGO, IL 60675-6007

WAKE COUNTY REVENUE DEPT  
P.O. BOX 580084  
CHARLOTTE, NC 28258-0084

WALKER AUTOMOTIVE STORES  
P O BOX 19348  
RALEIGH, NC 27619

WALKER, LAWRENCE  
498 GOVERNMENT RD  
CLAYTON, NC 27520

WALKER, WILLIAM S  
5085 STONEYPPOINT ROAD  
WALKERTOWN, NC 27051

WALLACE, MICHAEL B  
245 WOODGREEN DR  
ABERDEEN, NC 28315

WARD, RICKY  
140 MAYNARD DRIVE  
WINSTON-SALEM, NC 27107

WASTE INDUSTRIES, INC.  
3301 BENSON DRIVE  
SUITE 601  
RALEIGH, NC 27609

WASTE INDUSTRIES, INC.  
3301 BENSON DRIVE  
RALEIGH, NC 27609

WASTE MANAGMENT  
1001 FANNIN, SUITE 4000  
HOUSTON, TX 77002

WATKINS, JEFFREY E  
437 REGENCY DR  
WILMINGTON, NC 28412

WEAVER, GARY  
4432 MEBANE ROGERS RD  
MEBANE, NC 27302

WEHRMEYER, ANN  
438 W. WELLINGTON LANE  
WALNUT COVE, NC 27106

WELLS FARGO BANK, NA  
110 EAST BROWARD BLVD  
SUITE 1100  
FORT LAUDERDALE, FL 33301

WEST, BRIDGET M  
6455 PATRICK DR NE  
LELAND, NC 28451

WESTAR DISTRIBUTION, LLC  
8700 ROBERT FULTON DR  
SUITE B  
COLUMBIA, MD 21046

WESTERN VIRGINIA WATER AU  
P O BOX 17381  
BALTIMORE, MD 21297-1381

WHEELER, JOSEPH  
P.O. BOX 57  
WHITSETT, NC 27377

WHISENANT, BEULAH S  
126 WALKER RD  
MORGANTON, NC 28655

WHITE, GREGORY  
1036 MURPHY ROAD  
WALNUT COVE, NC 27052

WHITE, JAMES  
320 BRADFORD DR  
CHARLOTTE, NC 28208

WHITE, WILLIAM P  
2920 WHEAT MEADOW LANE  
CHARLOTTE, NC 28270

WHITEHEART AND SONS CO  
3500 N PATTERSON AVE  
WINSTON SALEM, NC 27105

WHITESELL, LEROY E  
3311 MARTIN AVE  
GREENSBORO, NC 27405

WHITT, JAMES S  
135 S. TWIN HILL RD  
CLEMMONS, NC 27012

WILLIAMS, JAMES M  
1007 GORDON WOODS RD  
WILMINGTON, NC 28411

WILLIAMS, JAMES R  
4330 MCCLURE RD  
CHARLOTTE, NC 28216

WILLIAMS, JEREMY B  
6001 PHELPS CIRCLE  
WINSTON-SALEM, NC 27105

WILLIFORD, STEVEN E  
452 LIPSCOMB ROAD  
ANGIER, NC 27501

WILSON, RICHARD M  
4608 CHARLOTTESVILLE RD  
GREENSBORO, NC 27410

WINDSTREAM  
P.O. BOX 9001013  
LOUISVILLE, KY 40290-1013

WOMACK, DAVID  
117 WINDOVER LANE  
WINSTON-SALEM, NC 27107

WOOD'S FLEET & TRUCK CENT  
418 WASHINGTON AVE  
VINTON, VA 24179

WOOD, LARRY  
7740 BROAD STREET  
RURAL HALL, NC 27045

WOODRING, KEVIN  
2003 PL PROPST ROAD  
MAIDEN, NC 28650

WOTCO INCORPORATED  
P.O. BOX 30502  
CHARLOTTE, NC 28230

WRAP-IT  
9040 HIGHVIEW LANE  
WOODBURY, MN 55125

WURTH USA INC.  
P O BOX 415889  
BOSTON, MA 02241-5889

YERGEAU, COREY J  
29 MOREHEAD DR  
WILLOW SPRING, NC 27592

YOST JR, BILLY G  
316 MOSSY OAK CT  
LELAND, NC 28451

ZF SERVICES, LLC  
P O BOX 5820  
CAROL STREAM, IL 60197-5820



**United States Bankruptcy Court  
Middle District of North Carolina**

In re **Auto Supply Company, Inc.**

Debtor(s)

Case No.

Chapter

**11**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Auto Supply Company, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

**January 8, 2018**

Date

**/s/ Ashley S. Rusher****Ashley S. Rusher 14296**

Signature of Attorney or Litigant

Counsel for **Auto Supply Company, Inc.****Blanco Tackabery & Matamoros, P.A.****P.O. Drawer 25008****Winston-Salem, NC 27114-5008**

RESOLUTION OF THE BOARD OF DIRECTORS OF  
AUTO SUPPLY COMPANY, INC.

ADOPTED JANUARY 5, 2018

The undersigned, being all of the Directors of Auto Supply Company, Inc., a North Carolina corporation (herein the "Company"), do hereby adopt the following resolutions by signing their written consent thereto and do hereby waive any notice or other irregularity regarding the time, place, or purpose of any meeting to consider same:

**WHEREAS**, the Board of Directors has considered the financial status of the Company and other matters affecting the successful operation of the Company; and

**WHEREAS**, the Board of Directors has considered the recommendations of the officers and counsel of the Company with reference to alternative plans of action;

**NOW, THEREFORE, BE IT**

**RESOLVED**, that in the judgment of the Board of Directors, it is desirable and in the best interest of the Company, its creditors, and other interested parties, that a petition be filed by the Company under the provisions of Chapter 11 of Title 11 of the United States Code; and, it is further

**RESOLVED**, that the form of petition under Chapter 11 presented to the Board of Directors be, and the same hereby is, approved and adopted in all respects, and that the president of the Company be, and is hereby authorized and directed, on behalf of and in the name of the Company, to execute and verify a petition substantially in such form and to cause the same to be filed with the United States Bankruptcy Court for the Middle District of North Carolina; and it is further

**RESOLVED**, that the officers of the Company be, and they hereby are, authorized to execute and file all petitions, schedules, lists, and other papers and to take any and all actions which they may deem necessary or proper in connection with such proceedings under Chapter 11, and in that connection, to retain and employ all assistance by legal counsel or other professionals which they may deem necessary or proper, with a view to the successful conclusion of such proceedings; and it is further

**RESOLVED**, that all transactions heretofore taken by any officers of the Company on its behalf and in its name, with respect to the planning and preparation for the commencement of such proceedings under Chapter 11 prior to

the adoption of this Resolution are, in all respects, hereby ratified, confirmed and adopted.

AUTO SUPPLY COMPANY, INC.

Charles A. Key Jr.  
Charles A. Key, Jr., Director

R. Daniel Luper  
R. Daniel Luper, Director

[CORPORATE SEAL]

Karl W. Kapp  
Karl W. Kapp, Secretary